

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 537184

1. Entity Name
THE FRAME WORLD, INC.



Principal Place of Business
**671 ORANGE AVENUE
WINTER PARK, FL 32789**

Mailing Address
**671 ORANGE AVENUE
WINTER PARK, FL 32789**

**FILED
Jan 28, 2005 08:00 AM
Secretary of State**



01192005 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2044126	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**THOMPSON, KATHRYN F.
1530 STONE TRAIL
ENTERPRISE, FL 32725**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THOMPSON, RONALD W. 671 ORANGE AVENUE WINTER PARK FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THOMPSON, RONALD W. 671 ORANGE AVENUE WINTER PARK FL.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V THOMPSON, KATHRYN F. 1530 STONE TRAIL ENTERPRISE, FL
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01/28/05-80098-017 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald W. Thompson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-22-05 407-774-2508