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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F64852

1. Corporation Name

~~FLORIDA TITLE AND GUARANTY COMPANY OF PINELLAS C~~
~~OUNTY~~ EASY FROG ENTERPRISES, INC.

Principal Place of Business
2958 1ST AVE. NO.
ST. PETERSBURG FL 33713

Mailing Address
2958 1ST AVE. NO.
ST. PETERSBURG FL 33713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1982

4. FEI Number

59-2157965

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

7. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 11444 - 74th AVE. N.

Suite, Apt. #, etc.

22

City & State

23 SEMINOLE FL.

Zip

24 33772

Country

25 USA

2a. Mailing Address

26 11444 - 74th AVE. N.

Suite, Apt. #, etc.

27

City & State

28 SEMINOLE FL.

Zip

29 33772

Country

30 USA

9. Name and Address of Current Registered Agent

GORDON, SEYMOUR A
699 FIRST AVENUE NORTH
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC ☐ DELETE

NAME GREGG, THOMAS M

STREET ADDRESS 11444 74TH AVE N

CITY-ST-ZIP SEMINOLE FL

TITLE V ☒ DELETE

NAME DENISE BALCOM

STREET ADDRESS 3990 43RD AVE N

CITY-ST-ZIP ST. PETERSBURG FL 33714

TITLE ST ☒ DELETE

NAME RADER, JUDITH A

STREET ADDRESS 5040 86TH AVE N

CITY-ST-ZIP PINELLAS PK, FL 00000

TITLE V ☒ DELETE

NAME MULLINIX, BARBARA A.

STREET ADDRESS 9839-53RD AVE N.

CITY-ST-ZIP ST. PETERSBURG FL

TITLE V ☒ DELETE

NAME LYNN K KIDD

STREET ADDRESS 2537 PINE COVE LN

CITY-ST-ZIP CLEARWATER FL 33761

TITLE V ☒ DELETE

NAME JOSEPH D SEITZ, SR

STREET ADDRESS 2301 MORGAN ST

CITY-ST-ZIP TAMPA FL 33602

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

S/D
BARBARA GREGG
11444 - 74th AVE. N.
SEMINOLE, FL 33772

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature and Typed or Printed Name of Signing Officer or Director

4/9/99 727-399-8482

Date

Daytime Phone #

0410659

CR2E034 (1/1/98)