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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H62901 (4)

1. Corporation Name

~~JOHNSON-FREY DESIGN GROUP, INC.~~

JOHNSON-FREY-TURZAK GROUP, INC.

12/14/96 N.C.

Principal Place of Business

6216 GRAND BLVD  
NEW PORT RICHEY FL 34652

Mailing Address

6216 GRAND BLVD  
NEW PORT RICHEY FL 34652



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMPBELL, JAMES  
317 E MAIN ST  
NEW PORT RICHEY FL 33552

81 Name

Bruce L. Frey

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

6216 Grand Boulevard

83

84 City

New Port Richey

FL

85 Zip Code

34652

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, and I, the undersigned, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Bruce L. Frey, President

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

(NOTE: Registered Agent must be a resident of Florida or a corporation organized under the laws of the State of Florida.)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PTD  
FREY, BRUCE  
6216 GRAND BOULEVARD  
NEW PORT RICHEY FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VSD  
JOHNSON, SHAYNE  
6216 GRAND BOULEVARD  
NEW PORT RICHEY FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V  
PIRANO, DAVID R  
6216 GRAND BOULEVARD  
NEW PORT RICHEY FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD

1.2 NAME

Frey, Bruce

1.3 STREET ADDRESS

6216 Grand Boulevard  
New Port Richey, Florida 34652

1.4 CITY-ST-ZIP

2.1 TITLE

SD

2.2 NAME

Johnson, Shayne

2.3 STREET ADDRESS

6216 Grand Boulevard

2.4 CITY-ST-ZIP

New Port Richey, Florida 34652

3.1 TITLE

TD

3.2 NAME

Turzak, Oliver J.

3.3 STREET ADDRESS

6216 Grand Boulevard

3.4 CITY-ST-ZIP

New Port Richey, Florida 34652

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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-04/29/96--01041--012  
\*\*\*200.00

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone

CR2E034 (12/95)