## 2004 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

## ANNUAL REPORT DOCUMENT # H82676 . . . 1. Entity Name FREEMAN'S INDEPENDENT ICE CO., INC.

FILED Apr 05, 2004 08:00 AM Secretary of State

Principal Place of Business

% FREEMAN PRICHETT 7400 ŒDAR ST NE ST PETERSBURG, FL 33702 Mailing Address

% Freeman Prichett 7400 Cedar St Ne St Petersburg, Fl. 33702



01092004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2593280

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRICHETT, FREEMAN 7400 CEDAR ST NE ST PETERSBURG, FL 33702

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>						
SIGNATURE Signature, typed or provided name of registered agent and trife if applicable (NOTE, Registered Agent agent agent when rematating)					DATE	-
FILE NOWI!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees		,
10. OFFICERS AND DIRECTORS			i	· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CRY-ST-ZIP	OP PRICHETT, FREEMAN 7400 CEDAR ST NE ST PETERSBURG, FL				U00000102255	
TITLE NAME STREET ADDRESS CRY-SI-ZIP	STD PRICHETT, JOAN 7400 CEDAR ST NE ST PETERSBURG, FL				04/05/04-80006-020 150.0	0
ITTLE NAME STREET ADDRESS CITY-ST-ZIP	V PRITCHETT, STEVEN E. 2500=58TH AVE., NO ST. PETERSBURG, FL			DO	NOT WRITE	
NAME STREET ADDRESS CITY-SI-ZIP				IN	THIS SPACE	
TITLE NAME SIBEET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this tiling 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 comporation 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.						