FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

R. FRY BUILDERS, INC.

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



1% ROCHELLE Z. CATZ 13181 MCGREGOR BLVD. FT. MYERS FL 33919-5940		% ROCHELLE Z. CATZ 13161 MCGREGOR BLVD. FT. MYERS FL 33919-5940)	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1986	
2. Principal P	lace of Business	2s. Mailing Address	·	4. FEI Number	Applied For
		LUD 26 3210 JUA	WITH RIVE	59-2705359	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	MILIT_DEND_		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State 23 CAPE	CORAL, FL	City & State CAPE CO	RAL, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24 327	09 25 U.	5A 29 33909	30 USA	Personal Property Tax due June 30.	☐ Yes ☐ No
	9. Name and Address	of Current Registered Agent		10. Name and Address of New Registe	red Agent
CATZ, ROCHELLE Z. 81 Name					
ANAL MAGREGOR BULD					
FT. MYERS FL 33907					
			541	TE A	
			84 City		FL 85 Zip Code 339/9
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 r	epistered agent, or both, in	i the State of Horida. Such change was a	uthorized by the coroc	orporation submits this statement for the purpor pration'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					
·			Rogistered Agent signature re		
12.		CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP	☐ ĎĒLĒTĒ	1.1 TITLE		Change Addition
NAME	FRY, RANDY A.		1.2 NAME		
STREET ADDRESS	3210 JUANITA BLVD		1.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL		1.4 CITY - ST - ZIP		
TITLE	DST	☐ DELE te	2.1 TITLE		Change Addition
NAME	FRY, CONNIE D.		2.2 NAME		i
STREET ADDRESS	3210 JUANITA BLVD		2.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		ì
STREET ADDRESS			3.3 STREET ADDRESS		j
CITY-ST-ZIP			3.4. CITY-S1-ZIP		
TITLE		DFLETE	4.1 TITLE	······································	Change Addition
NAME			4. 2 NAME		· · ·
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		- October	5.2 NAME		onenge needled
STREET ADDRESS			5.3 STREET ADDRESS		j
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Change Addition
TITLE		L) offer	61 TITLE		L change L Accidion
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
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Thereby computed the mormation supplied with this ming closs not quality for the exemption stated in section 119.07(3)(), Florida Statutes. Further certify that the informatic 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 enofficer 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.