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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J17863

**FRENTZEN CONSTR** 

UCTION,	INC.	
	*, • •	

(8)

Address	
W. 85TH TERRACE	

**FILED** 

May 06 1997 8:00am

Secretary of State

Principal Place	of Business	Mailing Address				ALBEL AIDII AYSYA BIRII BABL	F 8)8)( )
6812 N.W. 65TH TERRACE		6812 N.W. 85TH TERRAC	6812 N.W. 85TH TERRACE				
GAINESVILLE F	L <b>326</b> 53	GAINESVILLE FL 32653-2	966				
US		US			3. Date Incorporated or Qualified 06/05/1986	3a. Date of Last R	eport
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26	F1 -		59-2749120	No	ot Applicable
Suite, Apt. #	, etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired	\$8.75	Additional
22		27	27		5. Certificate of Status Desired	Fee Re	equired
City & State	1	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be		
23		28	·r		Trust Fund Contribution		to Fees
Zip	Country	Ζφ	Cour	ntry	8. This corporation has liability for in		. 199.032
24	9. Name and Address of Current	29	30		f lorida Statutes  10. Name and Address of New Reg	Yes No	
		negistered Agent		81 Name E		istered Agent	
FHE	NTZEN, JAN		Į	T-	RENTZEN, JAN		
	N.W. 85TH TERRACE			82 Street Add	ress (P.O. Box Number is Not Acquetable 8/2 NW 85	0)0000	
GAIN	NESVILLE FL 32606		+	83	016 18.84. 03-16	EXXALE	
				84 City	4: 11531111	FL 85 Zip	Sodo-
11 Purcuant to	o the provisions of Sections 607 060	and CO7 1608 Florida Statu	doe the at	love parced con	poration submits the eletement for the or		te registered
office of re	egistered agent, or both, in the State	of Florida. Such change was	authorized	by the corpora	noration submits this statement for the pa lion's hoard of directors. I hereby accep	t the appointment as	registered
agent, I an	n familiar with and accept the obliga	tions of, Section 607.0505, F				ulanta	~
SIGNATURE .	Similature: Typed or printed name of registered tiges	at and title if another by	N 7 / €	Agent signature requ	! At Csident	7/28/7	Z
12.	OFFICERS AND	*	13.	18.11119	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	S IN 12
TITLE	ST	DELETE	1.1 10	LF		Change	Addition
NAME	FRENTZEN, BARBARA		1.2 NA	ME			
STREET ADDRESS	6812 NW 85 TERRACE		1.3 \$3	REET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL		1.4 CIT	Y-ST-21P			
TITLE	P	DELFTE	2.1 111	LÉ		Change	Addition
NAME	FRENTZEN, JAN		2.2 NA	ME.			
STREET ADDRESS	6812 NW 85 TERRACE		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL		2. <b>4</b> CI	1Y-S1-7IP		8 V -	
TITLE		☐ DELETE	3.1 717	LE		☐ Change	Addition
NAME			3.2 NA	ME )			
STREET ADDRESS			3.3 ST	REF1 ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		☐ DELETE	4 1 TIT			L. Change	Addition
NAME			4 2 N	MME			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		Dr. Fre		Y-ST-7IP			T Address
TITLE		☐ DECFTE	5.1 TIT	ı		L Change	L_I Addition
NAME			5.2 NA				
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		DELETE		IY-S1-ZIP			A ALADES
TITLE		DELETE	6.1 111	!		☐ Change	[_] Addition
NAME			6.2 NA	ı			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP			6.4 CF	Y-ST-ZIP			

14. I do 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.