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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L59287 (7)

1. Corporation Name

FRETWELL ENTERPRISES, INC.



Principal Place of Business

P.O. BOX 4374
SOUTH DAYTONA FL 32121-4374
US

Mailing Address

P.O. BOX 4374
SOUTH DAYTONA FL 32121-4374
US

3. Date Incorporated or Qualified

03/21/1990

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 735 Big Tree Rd
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 South Daytona FL

28 City & State

24 Zip

25 Country

29 Zip

30 Country

24 32119

25 US

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRETWELL, M GREGORY
735 BIG TREE RD
S DAYTONA FL 32119

11 Name

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

13

14 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]

D. V.P.

(If C/OE Registered Agent signature is required, attach here.)

4/24/96

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME FRETWELL, MARVIN S
STREET ADDRESS 2251 BRIAN AVE
CITY - ST - ZIP S DAYTONA FL

TITLE DVP ☐ DELETE

NAME FRETWELL, M GREGORY
STREET ADDRESS 735 BIG TREE RD
CITY - ST - ZIP S DAYTONA, FL

TITLE DST ☐ DELETE

NAME FRETWELL, NONA T
STREET ADDRESS 2251 BRIAN AVE
CITY - ST - ZIP S DAYTONA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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]

D. V.P.

(SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4/24/96

704 747-5566

Daytime Phone #

CR2E034 (12/95)