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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # L64107**

1. Corporation Name

FREEDOM FIRST, INC.

Mailing Address Principal Place of Business C/O JOSEPH D. LOSCH C/O JOSEPH D. LOSCH 2700 GARDEN ST. PO BOX 401 2700 GARDEN ST. . PO BOX 401 DO NOT WRITE IN THIS SPACE MALABAR FL 32950 MALABAR FL 32950 3. Date Incorporated or Qualifed 04/09/1990 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3001189 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 Country Zip 8. This corporation owes the current year Intangible Country Zip Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent LOSCH, JOSEPH D. Street Address (P.O. Box Number is Not Acceptable) 2700 GARDEN STREET **PO BOX 401** 83 MALABAR FL 32950 Zip Code 84 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) the control of the c ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE For 1, 1,60 TITLE LOSCH, JOSEPH D. 1.2 NAME NAME 2700 GARDEN STREET 1.3 STREET ADDRESS STREET ADDRESS MALABAR FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE LOSCH, NANCY M. 2.2 NAME NAME 2700 GARDEN STREET 2.3 STREET ADDRESS STREET ADDRESS MALABAR FL . . .: 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME  $\binom{k_1}{7} \binom{k_2}{3} \binom{k_$ 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ...

14. I 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, with all other like empowered.

41 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS 4.4 City-St-Zip

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

75

SIGNATURE:

MAR CAPTURE

MELRICA

TITLE

TITLE

NAME

TITLE

NAME

NAME (1.13924) STREET ADDRESS (1.1

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SENING OFFICER OR DIRECTOR

DELETE

☐ DELETE

□ DELETE

-14,1999 407-72,5-0739

**FILED** 

Feb 01, 1999 8:00am

**Secretary of State** 

02-01-1999 90038 014 \*\*\*150.00

CR2E034 (11/98)

☐ Addition

☐ Change