

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006989

Entity Name: THE FREGLY FOUNDATION, INC.

FILED  
Jan 20, 2004  
Secretary of State

## Current Principal Place of Business:

6581 NW 20TH PLACE  
GAINESVILLE, FL 32605

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 147050  
GAINESVILLE, FL 32614

## New Mailing Address:

FEI Number: 59-3678602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREGLY, MARILYN S DR  
6581 NW 20TH PLACE  
GAINESVILLE, FL 32605 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FREGLY, MARILYN DR.  
Address: PO BOX 147050  
City-St-Zip: GAINESVILLE, FL 32614

Title: VP ( ) Delete  
Name: DAVIS, FRANK R  
Address: 2627 NW 43RD STREET  
City-St-Zip: GAINESVILLE, FL 32606

Title: ST ( ) Delete  
Name: BOVAY, JOHN C  
Address: 901 NW 57TH STREET  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: CRUM, ROY  
Address: 1506 NW 14TH AVE  
City-St-Zip: GAINESVILLE, FL 32605

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FREGLY, MARILYN S DR.  
Address: PO BOX 147050  
City-St-Zip: GAINESVILLE, FL 32614

Title: VP (X) Change ( ) Addition  
Name: DAVIS, FRANK E  
Address: 2627 NW 43RD STREET  
City-St-Zip: GAINESVILLE, FL 32606

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK DAVIS

VP

01/20/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date