

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2005 8:00 am
Secretary of State

04-18-2005 90315 013 ****61.25

DOCUMENT # N04000009829 1. Entity Name FRPG CHARITABLE FOUNDATION CORPORATION																																																																																																								
Principal Place of Business 2181 LOGAN STREET CLEARWATER, FL 33765			Mailing Address 2181 LOGAN STREET CLEARWATER, FL 33765																																																																																																					
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Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																						
City & State		City & State																																																																																																						
Zip	Country	Zip	Country																																																																																																					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																																																																																				
PAPPAS, GEORGE G PA 901 N. HERCULES AVE. STE C CLEARWATER, FL 33765				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																				
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE																																																																																																								
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees																																																																																																				
		Make check payable to Florida Department of State																																																																																																						
10. 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12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																								
SIGNATURE: <u>James Koutsos</u> <u>4/12/05</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																								

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01082005 Chg-NP CR2E037 (10/03)

4. FEI Number **20-1758200** Applied For ☐ Not Applicable ☒
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required