

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007207

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** THE FRY FOUNDATION, INC.

**Current Principal Place of Business:**

2019 EAST DEL WEBB BLVD.  
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

**Current Mailing Address:**

2019 EAST DEL WEBB BLVD.  
SUN CITY CENTER, FL 33573

**New Mailing Address:**

**FEI Number:** 59-3547265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRY, WILLIAM S PTD  
2019 EAST DEL WEBB BLVD.  
SUN CITY CENTER, FL 33573 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: PTD  
Name: FRY, WILLIAM S PTD  
Address: 2019 EAST DEL WEBB BLVD.  
City-St-Zip: SUN CITY CENTER, FL 33573 US

Title: VPD  
Name: FRY, THOMAS K VPD  
Address: 12505 HIDDENBROOK DR.  
City-St-Zip: TAMPA, FL 33624

Title: VPSD  
Name: FRY, TINA DS  
Address: 12505 HIDDENBROOK DR.  
City-St-Zip: TAMPA,, FL 33624

Title: D  
Name: HUGHES, AMALIA H D  
Address: 5354 BLACK PINE DR.  
City-St-Zip: TAMPA, FL 33624

I hereby 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 all other like empowered.

SIGNATURE: W S FRY

PTD

01/04/2012

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

\_\_\_\_\_  
Date