2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR) 🥕

Mar 05, 2004 8:00 am 2 Secretary of State **DQCUMENT # P03000064801** 02-23-2004 90061 046 ***150.00 JW FRITZ PARTNERS, INC. Principal Place of Business Mailing Address 66404609 26100 S W 112THH AVE HOMESTEAD FL 33032 26100 S W 112THH AVE HOMESTEAD FL 33032 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) MOORE City & State Applied For 4. FEI Number City & State Not Applicable <u> 5</u>8 -Country Country Zρ Ziρ \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAW, LESTER B Street Address (F.O. Box Number is Not Acceptable) C/O GRANT FRIDKIN PEARSON ATHAN & CROWN 551 RIDGEWOOD DRIVE STE 501 NAPLES FL 34108 City 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 agont and title if applicable (NOTE: Registered Agent signature required when reinstrong) DATE FILE NOW!!! FEE IS \$150.00 After May 1: 2004 Fee will be \$550.00 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PRESIDENT πLE ☐ Detete TITLE ☐ Addition FRITZ, JOHN C. NALE NAME 10950 SW 2757 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CLTY-ST-ZIP <u>33328</u> TITLE ☐ Delete DTLE Change Addition FRITZ, JEATLY E. NAME NAME 8343 NW 145 TEKR STREET ADDRESS STREET ADDRESS CITY-ST-ZIF Mismi Lakes FC 33416 CITY-ST-ZIP SECRETALY TITLE ☐ Delete TIRE Addition Change FRITH, IACK S. . NAME NAME 16801 SW 78 12 PL STREET ADDRESS STREET ADDRESS CITY-ST-709 mini-FC- 33157-CITY-ST-71P. TREASURE MILE ☐ Delete TITLE ☐ Change ☐ Addition FRITZ, JOYCE W NAME NAME 7945 SW 168 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Minni FL 33157 DIRECTOR CITY-ST-ZIP BILE Delete TITLE ☐ Change Addition FRITZ, JAMES L. NAME NAME STREET ADDRESS 6527 S 1-25 STREET ADDRESS CITY-ST-ZIP CASTLE BOCK CO. 80109 CITY-ST-ZIP TITLE MTI F ☐ Addition Change FLOYD, JENNIFER. NAME NAME 9729 N Grand Duke Circle STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP 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 supplied negative port 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 tripstee empowerfel to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attactment with an address with allower like empowered. SIGNATURE:

FILED