

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000133592

Entity Name: FRONDWOOD, INC.

**FILED**  
**Oct 21, 2008**  
**Secretary of State**

## **Current Principal Place of Business:**

2208 N.E. 26TH STREET  
WILTON MANORS, FL 33305

## **New Principal Place of Business:**

6917 VISTA PARKWAY NORTH  
#14  
WEST PALM BEACH, FL 33411

## **Current Mailing Address:**

2208 N.E. 26TH STREET  
WILTON MANORS, FL 33305

## **New Mailing Address:**

13727 ALDSWORTH CT  
WELLINGTON, FL 33414

FEI Number: 20-1711281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLARKSON, JUNE M ESQ  
2640 HOLLYWOOD BLVD STE 201  
HOLLYWOOD, FL 33020 US

## **Name and Address of New Registered Agent:**

GLENN, NICHOLAS  
10733 LAGO WELLEBY DR  
SUNRISE, FL 33351 US

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: NICHOLAS GLENN

10/21/2008

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: HOLLINGSWORTH, JAMES M  
Address: 2208 N.E. 26TH STREET  
City-St-Zip: WILTON MANORS, FL 33305

Title: VP ( ) Delete  
Name: GLENN, NICHOLAS T  
Address: 2208 N.E. 26TH STREET  
City-St-Zip: WILTON MANORS, FL 33305

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: GLENN, NICHOLAS T  
Address: 10733 LAGO WELLEBY DR  
City-St-Zip: SUNRISE, FL 33351

Title: VP (X) Change ( ) Addition  
Name: DAVIS, WILLIAM H  
Address: 13727 ALDSWORTH CT  
City-St-Zip: WELLINGTON, FL 33414

Title: CFO ( ) Change (X) Addition  
Name: DAVIS, MICHELLE R  
Address: 13727 ALDSWORTH CT  
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICHOLAS GLENN

PS

10/21/2008

Electronic Signature of Signing Officer or Director

Date