## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000163604

Entity Name: FRIENDLY FRANKIES BS, INC.

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
P O BOX 156 CAPE CORAL, FL 33993				3015 PINE ISLAND RD CAPE CORAL, FL 33991	
Current N	lailing Address	s:	New Mailing Addres	ss:	
P O BOX <sup>^</sup> CAPE CO	156 RAL, FL 33993				
FEI Number: 86-1152670 FEI Number Applied For ( )			FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
FRANK, R 2763 GEA MATLACH		US			
	e named entity s e of Florida.	ubmits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electroni	c Signature of Registered Age	nt	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	PD () FRANK, RICHAR 2763 GEARY ST MATLACHA, FL	-	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () FRANK, ELIZAB 2763 GEARY ST MATLACHA, FL	-	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD () FRANK, JOSEPH P O BOX 156 CAPE CORAL, F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD () FRANK, MATTHE P O BOX 156 CAPE CORAL, F		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: Citv-St-Zip:	TD () FRANK, ANTHOI P O BOX 156 CAPE CORAL, F		Title: Name: Address: City-St-Zin:	( ) Change ( ) Addition	

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: JOSEPH FRANK VPD 04/02/2009