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PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Moltham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P24160

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NORMAN W. FRIES, INC.

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Jun 03 1	997	8:00am
Secret	ary c	of State

Principal Place of Business HWY 301 NORTH P.O. BOX 428 CLAXTON GA 30417-0428		HWY S P.O. B	Mailing Address HWY 301 NORTH P.O. BOX 428 CLAXTON GA 30417-0428			1 (49)1199 (16 1(9)1 41991 (16)4 51(1) 519)1 41(4) 51611 51(6) 51611 51(6) 5190						
		-					3. Date In 05/03	corporated or 0 /1989	Qualified	l .	te of Last . 3/1996	Report
2. Principal Place of Business		2a. M	ailing Address				4. FEI Nu					pplied For
21		26					58-0	703332				lot Applicable
Sulte, Apt. #, etc.		Su	ite, Apt.#, etc.						- 101		\$8.75	Additional
22		27					b. Cerlific	ate of Status De	esirea		Fee F	tequired
City & State		Ci	ly & State				6. Electio	n Campaign Fin	ancing		\$5.00) May Be
		28				_	Trust F	und Contributio	n			to Fees
· ·	Country	Zij	p	Cou	intry		8. This co	rporation has li			tax under	s. 199.032,
24 25		29		30				Statutes] No	
9. Name and	Address of Current	Registere	ed Agent		L,		10. Name	and Address o	1 New Reg	istered A	gent	
CT CORPORATION	SYSTEM				81	Name						
1200 S. PINE ISLA	ND ROAD				82	Street Ado	trass /P.O. Boy	Number is Not	Accontabl	a)		
PLANTATION FL 33					امّا	Ollect Auc	11035 (1.O. DOX	Number is 140t	vecebian	0)		
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* 4					84	City				FL	85 Zip	Code
11. Pursuant to the provisions	of Sections 607 OFFIS	2 and 607	1508 Florida Sta	tutos the s	hovo	named cor	moration submi	te this statemen	t for the e		changing	ite registere
SIGNATURE												
12.	of registered agen		RS	IOTE: Hegistere	d Agei	nt signature requ	uired when reinstating) NS/CHANGES	TO OFFICI			RS IN 12
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• I or nereby certify that the information supplied with this fling does not qualify for the exemption stated in Soction 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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4/29/97 912-739-318/