SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000046219 (0) FRAZEE ENTERPRISES INC. Principal Place of Business Mailing Address 2980 ROCKY POINT ROAD 2860 ROCKY POINT ROAD MALABAR FL 32950 MALABAR FL 32950 3a. Date of Last Report 3. Date Incorporated or Qualified 06/24/1993 05/01/1995 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-3189457 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Zιρ Country 8. This corporation has liability for intangible tax under s. 199.032. Tyes No Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FRAZEE, CLARK W Street Address (P.O. Box Number is Not Acceptable) 2860 ROCKY POINT ROAD 82 MALABAR FL 32926 83 Zip Code City 84 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DA!E SIGNATURE (NOTE: Registered Agent's gnature required when reinstating) Signature, types or printed name of registered agent and fibril' applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELE TE Change Addition 1 1 TITLE TITLE DPST FRAZEE, CLARK W 1.2 NAME 2860 ROCKY POINT ROAD 1.3 STREET ADDRESS STREET ADDRESS MALABAR FL 32950 14 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2 1 TULE TITLE 22 NAME FRAZEE, DANIEL L NAME 2860 ROCKY POINT ROAD 2.3 STREET ADDRESS STREET ADDRESS MALABAR FL 32950 2 4 CiTy - S1 - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TIFLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 O(TY - ST- 7)P CITY-ST-ZIP DELETE Change Addition 4.1 THILE TIFLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4 4 CHY - ST- ZIF Change Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY ST-ZIP CITY-ST-ZIP Change Addition DELETE 6 1 THLE TITLE 6.2 NAME NAME

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated by the annual report is true and accurate and that my's gnature shall have the same legal effect as if made under oath, that I arrow officer 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 in block 12 or Block 13 if changed or on an attachment with an address.

63 STREET ADDRESS 64 CHY+ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

401) 253-0402

(96/8)

CR2E034