FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000046219

1. Corporation Name

FRAZEE ENTERPRISES INC.

Principal Place of Business

Mailing Address

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90106 015 ***150.00



2860 ROCKY POINT ROAD MALABAR FL 32950		2860 ROCKY POINT ROAD MALABAR FL 32950			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/24/1993
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-3189457 Not Applicable
Suite,:Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country		Zip			8. This corporation owes the current year Intangible
24	25	29 30	<u> </u>		Personal Property Tax. ☐ Yes XXNo
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Current	t Registered Agent	81		10. Name and Address of New Registered Agent
EDA7	ZEE, CLARK W		81	Name	
	ROCKY POINT ROAD	•	82	Street	Address (P.O. Box Number is Not Acceptable)
	ABAR FL 32926		-		
MALA	ADAM FL 32920		83		
			84	City	85 Zip Code
				1	FL T
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPST	DELETE	1.1 TITLE		DV ☐ Change ☐ Addition
NAME .	FRAZEE, CLARK W		1,2 NAME		FRAZEE, CLARK W.
STREET ADDRESS	2860 ROCKY POINT ROAD		1.3 STREE	T ADDRESS	2860 ROCKY POINT ROAD
CITY-ST-ZIP,	MALABAR FL 32950	_	1.4 CITY-S	T- ZIP	MALABAR, FL 32950
TITLE	DV	[] DELETE	2.1 TITLE		Change XXAddition
NAME	FRAZEE, DANIEL L		2.2 NAME		ROCCAFORTE, DOUGLAS D.
STREET ADDRESS	2860 ROCKY POINT ROAD		2.3 STREE	TADDRESS	979 CROTON ROAD
-CITY-ST-ZIP	_MALABAR FL 32950	ام. سواجي	2.4 CITY-5	ST-ZIP	-MEI ROURNE FL 32935
TITLE	DCP	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME .	FRAZEE, CHARLES J		3.2 NAME		
STREET ADDRESS	ALLE DOCUMENT DOLD		3.3 STREE	T ADDRESS	
CITY-ST-ZIP	MALABAR FL 32950		3.4. CITY-5	ST-ZIP	
TITLE	DST	☐ DELETE	4,1 TITLE		☐ Change ☐ Addition
NAME .	FRAZEE, NORMA J		4, 2 NAME		
STREET ADDRESS	2860 ROCKY POINT ROAD		4.3 STREE	T ADDRESS	
CITY-ST-ZIP	MALABAR FL 32950	,	4.4 CITY-S	T-ZIP	
TITLE ,	DV	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME .	FRAZEE, ALEXANDER W		5.2 NAME		
STREET ADDRESS	2860 ROCKY POINT ROAD		5.3 STREE	T ADDRESS	
CITY-ST-ZIP	MALABAR FL 32950		5.4 CITY-S	T-ZIP	
TITLE	DV	- DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	FRAZEE, MARY MARIE A		6.2 NAME		
STREET ADDRESS	2860 ROCKY POINT WAY		6.3 STREE	T ADDRESS	,
	MALADAD EL 220EO		64 CITY-S	T-7IP	

14. 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 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, with all other like empowered.