

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Melora B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000007238 (6)

1. Corporation Name

FRAN, INC.

Principal Place of Business

8500 S.E. HIGHWAY 42
SUMMERFIELD FL 34491

Mailing Address

8500 S.E. HIGHWAY 42
SUMMERFIELD FL 34491

95 MAY -2 AM 10:35

DEPT. OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

01/20/1994

4. FEI Number

59-3228678

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUFF, FRANCES R
8500 S.E. HIGHWAY 42
SUMMERFIELD FL 34491

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 (if applicable)

(NOTE: Registered Agent Signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME HUFF, FRANCES R
STREET ADDRESS 8500 S.E. HIGHWAY 42
CITY ST ZIP SUMMERFIELD FL 34491

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CITY ST ZIP

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CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME 400001498484

13 STREET ADDRESS -05/24/95--01080--001

14 CITY ST ZIP ****200.00 ****200.00

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY ST ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY ST ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY ST ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY ST ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY ST ZIP

REMITTED BY MAY 1

5-1-95 + j

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, next that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Francis R. Huff

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER OF TITLE OR DIRECTOR

4/17/95

9047532270