## 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



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000025912 (4)

FREE ENERGY, INC.

Principal Place of Business Mailing Address						T NEORIODI: FIN NOVIL BANIN BANIN BANIN BANIN BANIN BIRIN BIRIN INIMI NIMI NIMI NIMI NIMI		
P.O. BOX 8597 JACKSONVILLE FL 32239-8597  2. Principal Place of Business		P.O. BOX 8597 JACKSONVILLE FL 32239-8597						
					3. Date Incorporated or Qualified	1	te of Last Report <b>14/1995</b>	
		2a. Mailing Address				<b>04/01/1994 4.</b> FET Number	1 00/	Applied For
·	ace of Business	26 Mailing Address				59-3311169		Not Applicable
Suite, Apt #	t etc	Suite. Apt #, etc	<del>-</del> -					\$8.75 Additional
22		27			5. Certificate of Status Desired	<u></u>	Fee Required	
City & State		City & State			6. Election Campaign Financing		<b>\$5.00</b> May Be	
23		28			Trust Fund Contribution	<u> </u>	Added to Fees	
Zip	Country	Zιp	Countr	Y		8. This corporation has liability for it		
24	25	29	30			Florida Statutes	Yes	No
Name and Address of Current Registered Agent				1	10. Name and Address of New Registered Agent Name			
EARNHARDT, CHARLES E			Ľ	1				
156	O SAMONTEE ROAD		8:	2	Street Addr	ress (P.O. Box Number is Not Acceptable	le)	
JACKSONVILLE FL 32211			B	3				
			8	4	City		FL	85 Zip Code
SIGNATURE	Signative Typed or protect came of registers Eq.	en and their applicable (tro ND DIRECTORS	It Registered A	ge.	e s guarde da pu	ADDITIONS/CHANGES 10 OFFIC	DATE DERS AND	
12.	D OFFICERS A)	DELETE	111111			100111011070111111222110 07111		Change Addition
NAME	EARNHARDT, CHARLES E		1.2 NAM	E				
STREET ADDRESS	1560 SAMONTEE ROAD		13\$1RE	El a	AODRESS			
CITY-SI-ZIP	JACKSONVILLE FL 32211		1.4 City	- SI	T - ZIP			
TITLE		DELETE	2 1 TIFLE				L	Change Addition
NAME			22 NAM	ċ				
STREET ADDRESS					ADDRESS			
CITY - ST - ZIP		T T DELETE	2.4 0 11		ST ZIP		т	Change Addition
TITLE		DELETE	3 1 TITU		1		L	and Change [1.] results
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STREET ADDRESS			3.4 CiTr					
CITY - ST - ZIP TITLE		DELETE	4 1 TITL					Change Addition
NAME			4 2 NAV	ΛĒ				
STREET ADDRESS			4.3.5180	(E)	ADDRESS			
CITY-ST-ZIP			4 4 CITY	- \$	if - ZiP		т	<u> </u>
TITLE		DELETE	5.1 1111				L	Change Addition
NAME			5.2 NAM					
STREET ADDRESS					ADDRESS			
CITY-S1-ZIP		DELETE	5.4 CITY		ST - Z1P			Change Add tion
TITLE			61 TITL		Ì		į	
NAMÉ			6 2 NAM 6 2 S IB		ADDRESS			
STREET ADORESS			64011					

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 119 07(3)(k). Florida Statutes 1 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 617, Florida Statutes, and that my name appears in Block 12 or Block 14 if chapter 3, or on an artifachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles E. Earnhardt

! 1844064 NO 1944 DIĞIN GÖNN BÖNN BÖNN BÖNN BÜNB 1196 1446 1440 1461 1661 1661

GM86 204

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