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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

DOCUMENT # P94000078001 (2)

1. Corporate Name
FRL, INC.

Principal Place of Business
4801 NE 58TH AVE
SILVER SPRINGS FL 34488

Mailing Address
4801 NE 58TH AVE
SILVER SPRINGS FL 34488

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation / Qualification: 10/20/1994

3a. Date of Last Report:

2. Principal Place of Business
21 1724 S.E. 58TH AVE
22 Suite, Apt. #, etc.
23 City & State: OCALA FL
24 Zip: 34472 25 County: MARION

2a. Mailing Address
26 7 ALMONO TRAIL LN
27 Suite, Apt. #, etc.
28 City & State: OCALA FL
29 Zip: 34472 30 County: MARION

4. FEI Number: 59-3277113 — 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
REED, JEFFREY M
4801 NE 58TH AVE
SILVER SPRINGS FL 34488

10. Name and Address of New Registered Agent
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 Section 607.0193, and/or 1608, 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 607.0193, Florida Statutes.

SIGNATURE: JEFFREY M. REED — 3/27/94

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City, State, Zip
PRESIDENT	JEFFREY M. REED	7 ALMONO TRAIL LN	OCALA FL 34472
VP	O.R. LEWIS	4801 N.E. 58TH AVE	SILVER SPRINGS FL 34488
SEC. TREASURE	JOHN E. FABIAN	5508 SE 8TH STREET	OCALA FL 34471

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 19__ — ☐ Change ☐ Addition

14. I hereby certify that the information required with this report, including any information and/or documents, does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above or on an attached sheet with an address.

SIGNATURE: JEFFREY M. REED — 3/27/95 (904) 732-6454
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Telephone Number

0364100 CP