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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P95000015205 (4)

FRIESLAND CORPORATION

Principa		Business
305 FEE	 	

Mailing Address

FILED Apr 04 1997 8:00am Secretary of State



302 LEE BLVD. LEHIGH ACRES						BLVD. 10 Acres Fi		-4 916			!						
											Ì	3. Date Incorporated or Qualified 02/23/1995		3a. Date of Last Report 04/08/1996			
2. Principal Pl			ν.			ng Addr		, 1,	, .	· .		4. FEI Number			App	lied For	
21 743 /		ukes	vr	26				Lak	<u>es</u>	DY.		65-0561714				Applicable	
Suite, Apt. :	#, eic	No. 4 a Mari		27	<u> </u>	e, Apt. #,	etc.			·····		5. Certificate of Status Desired			e Req	iditional uired	
City & Star 23 Lehigh	Acr		FL	28	Lel	& State	Ac	res		<u> </u>		6. Election Campaign Financing Trust Fund Contribution			00 M	lay Be Fees	
24 3393	36	Count 25	ry	29	Zip 33	936	'	30 Cc	untry	,		8. This corporation has liability for Florida Statutes	intangible Yes		er s. 1	199.032,	
	9. Name	and Addr	ess of Current	Reg	istered	Agent						10. Name and Address of New Re	gistered	Agent			
	gan, Johi								81	Name							
	lee BLVD, GH ACRES		6						82	Street A	ddres	s (P.O. Box Number is Not Accepta	ble)				
									В3								
								_	84				FL	. -	Zip Co		
11. Pursuant t	to the provis	ions of Sec	tions 607.0502	and	607.15	08, Florid	da Statu	utes, the	abov	e-named c	corpor	ation submits this statement for the a's board of directors. I hereby acce	purpose of	changir	ng its	registered	
agent. Lar	m familiar wi	th, and ac	cept the full		of, Sec	tion 607	0505, F	lorida St	atute	s.	CHALLON	to board of biroctors. Thoroby acces	بره اسم. بره اسم	01111111111	1 23 1	ogistered.	
SIGNATURE			AM			lohn	h.		99				3-19	-7'/	<u>'</u>		
12.	Segunda Appea		C LTQ Esteroy 9 Ser DEMCERS AND		tle if apple		{NC	TE: Register		ent signature re	berlupe	when reinstating) ADDITIONS/CHANGES TO OFFI	CERS AND	DIREC	TORS	IN 12	
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NAME	MORGAN	, JOHN N	I					- 1	NAME	1					•	_	
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STREET ADDRESS								2.3	STREET	ADDRESS							
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C-17-ST-7IP						☐ DE	LETE			ST-ZIP				Char		Addition	
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NAME ATTRIBUTE								1	NAME	ì							
STREET ADDRESS										ADDRESS							
OFY S1-7P						☐ DE	LETE	***************************************	TITLE	ST-21P				Char	nge	Addition	
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Till!					·- 	DE	LETE		TITLE	27 - 6.11				Char	nge	Addition	
NAME									NAME								
STREEL LADIORESS										ADDRESS							
CHY-SI-ZIP								- 1		ST - ZIP							
	by cortify the	t the infers	nation supplier	with	this filia	no does	not qua				ated in	Section 119 07(3)(i) Florida Statut	es I furthe	r certify	that II	ne	

Too makey certify that the information supplied with this filling 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 oriector of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Black 12 or Block 13 if object 4, or on an attachment with an address.

SIGNATURE:

3-19-97

941-368-6644