FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000023546 (1)**

1. Corporation Name

FREY, BURKE & FREY ENTERPRISES, INC.

Principal Place of Business	Mailing Address
~~2175 KINGSLEY AVE., BLDG. 2, UNIT 214 ORANGE PARK FL 32073~~	~~2175 KINGSLEY AVE., BLDG. 2, UNIT 214 ORANGE PARK FL 32073~~

3. Date Incorporated or Qualified: 03/22/1995
3a. Date of Last Report:

2. Principal Place of Business
21: 312 Devonshire Lane
22: Suite, Apt. #, etc.
23: City & State: Orange Park, Fl
24: Zip: 32073 25: Country: US

2a. Mailing Address
26: P.O. Box 639
27: Suite, Apt. #, etc.
28: City & State: ORANGE PARK, FL
29: Zip: 32067 30: Country: US

4. FEI Number: 59-3299891 ☐ 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

ATWATER, GREGORY L
1279 KINGSLEY AVE., STE. 102
ORANGE PARK FL 32073

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 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 _____ DATE _____
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D/S/T	☐ Change ☒ Addition
NAME	FREY, FRED		1.2 NAME		
STREET ADDRESS	312 DEVONSHIRE LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK FL 32073		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE	D/P	☐ Change ☒ Addition
NAME	BURKE, WILLIAM		2.2 NAME		
STREET ADDRESS	4915 SE MARINER VILLAGE LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	STUART FL 34997		2.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	~~FREY, MICHAEL~~		3.2 NAME		
STREET ADDRESS	~~312 DEVONSHIRE LANE~~		3.3 STREET ADDRESS		
CITY-ST-ZIP	~~ORANGE PARK FL 32073~~		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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. 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.

SIGNATURE: Fred W Frey 3/9/96 904-276-0326
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #