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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000063258 (4)

FRITZ & ASSOCIATES, INC.

## FILED Apr 01 1998 8:00am Secretary of State

Principal Plac	a of Business	Mailing Address	·							
Principal Place of Business Mailing Address  2702 WAKULLA AVENUE 2702 WAKULLA AVENUE										
PANAMA CIT		PANAMA CITY FL 32405								
						3. Date Incorporated or Qualified	: IN THIS S	JPACE		
						1 12				
2. Principal P	lace of Business	2a, Mailing Address				08/14/1995 4. FEI Number		TA	pplied For	
21 270	26 SAME				39-1225410			ot Applicable		
Suite, Apt.	Z WAKULA AVE	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional		
22		27				Fee Required				
City & State						6. Election Campaign Financing	_		May Be	
23 P/1 A	MAA CITY 46-	Zip Country				Trust Fund Contribution  Added to Fees				
27 374	105 25 U.S.	[29] 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
201207	9. Name and Address of Curren		301			10. Name and Address of New Re				
FR	XTZ, KENNETH		81	Nan	ie		-		***************************************	
2702 WAKULLA AVENUE PANAMA CITY FL 32405			82	Stro	ot Addre	Address (P.O. Box Number is Not Acceptable)				
					n noure	iss (r.o. box reamber is real Acceptat	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			83						-	
			84	City				<b>85</b> Zip	Code	
							<u> </u>	ــلـــــــــــــــــــــــــــــــــــ		
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State	² and 607.1508, Florida Statute of Florida: Such change was a⊢	s, the abov uthorized by	e-nam y the c	erporation	oration submits this statement for the pon's board of directors. I hereby accel	ourpose of pt the app	changing i ointment as	its registered 3 registered	
agent. J.a	m familiar with, and accept the obliga	itions of Section 607.0505, Flor	rida Statute	<b>S</b> .			1,1,0	100		
SIGNATURE	Seature broad or revoled basis of register than	nt and the if applicable (NOTE:	Bonistered An	ent siona	rute tequire	id when reinstating)	7/ <i>[2</i> ]	10		
12.	OFFICE BY ANI		13.			ADDITIONS/CHANGES TO OFFICE	CERS AND	DIRECTO	RS IN 12	
TITLE	VP T	☐ DELETE	1.1 TITLE		7			Change	Addition	
NAME	FRITZ, BARBARA		1.2 NAME		ŀ					
STREET ADDRESS	2702 WAKULLA AVENUE		1.3 STREET	T ADDRES	s					
CITY-ST-ZIP	PANAMA CITY FL 32405		1.4 CITY - 9	ST-ZIP					Laren	
TITLE				2.1 TITLE				Change	☐ Addition	
NAME			2.2 NAME		_					
STREET ADDRESS			2.3 STREET		S					
CITY-ST-ZIP	DELETE			2. 4 CiTY-ST-ZIP 3.1 TITLE				☐ Change	Addition	
NAME		_	3.2 NAME						_	
STREET ADDRESS			3.3 STREET	ADDRES	s					
CITY-ST-ZIP			3.4. CITY-	ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4 3 STREET	ADORES	s					
CITY-ST-ZIP			44 CITY-S	ST-ZIP						
TITLE	i ·	☐ DELETE	5.1 TITLE					L Change	Addition	
NAME			5.2 NAME		_ i					
STREET ADDRESS			5.3 STREET		s					
CITY-ST-ZIP TITLE	<u> </u>	DELETE	5.4 CITY - 5 6.1 TITLE	or- <i>1</i> 1P	+			Change	Addition	
NAME		<u></u> 0	6.2 NAME							
STREET ADORESS			6.3 STREET	ADDRES	s				•	

14. I hereby 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 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

CHARLEST TRUBE - KENNETH FRIK

4/15/98

(850) 184-6020