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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000072370

1. Corporation Name

FRYATT FISHING COMPANY

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90116 028 ***150.00



| | | | | | | | | († 1 06) 10 1 164 | |
|---|--|---------------------------------|----------|---------------|---------------------|---|----------------------------|--|----|
| Principal Place of Business Mailing Address | | | | | | - | 1010 (1000)(1) | il iban ben cent | |
| 410 HOPE STREET TARPON SPRINGS FL 34689 410 HOPE STREET TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 | | | | | | | | ÷ | |
| | | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | 3. Date Incorporated or Qualifed | SPACE | | 1 |
| | | | | | | | | | |
| | | Ta Mailing Address | | | | 09/19/1995 4. FEI Number | | pplied For | ł |
| | ace of Business | 2a. Mailing Address | | | | ==59-3337369==== | | lot Applicable | ł |
| Suite, Apt. 3 | # etc | Suite, Apt. #, etc. | | | | _ | | Additional | == |
| 22 | +, () | 27 | | | | 5. Certifcate of Status Desired | | Required | |
| City & State | | City & State | | | | 6. Election Campaign Financing | \$5.00 | May Be | |
| 23 | | 28 | | | | Trust Fund Contribution | | to Fees |] |
| Zip | Country | Zip | Cour | try | | 8. This corporation owes the current year Inta | ingible | | |
| 24 | 25 | 29 | 0 | | | Personal Property Tax. | Yes | □No | 1 |
| | 9. Name and Address of Curren | t Registered Agent | | | | 10. Name and Address of New Registered | Agent | | ┨ |
| | | | Į, | 81 Nam | е | | | | ļ |
| | ATT, GERALD T | | F | 82 Stree | et Addre | ss (P.O. Box Number is Not Acceptable) | | | 1 |
| | HOPE STREET | | | | | | | | ┨ |
| TAR | PON SPRINGS FL 34689 | | , | 83 | | | | | İ |
| | | | ŀ | 84 City | | | 85 Zip | Code | 1 |
| | | | | | | <u>FL</u> | | | 1 |
| office or re | to the provisions of Sections 607.050, egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was aut | norizea | ov the co | d corpo poration | ration submits this statement for the purpose of n's board of directors. I hereby accept the appoin | changing it itment as r | s registered egistered | |
| SIGNATURE | · · · · | | | | | | | | (|
| O'O'I'N' D'A'E | Signature, typed or printed name of registered ager | | - | Agent signatu | beriuper e | when reinstating) DATE | D DIDECT | ODE IN 12 | 1 |
| 12. | | ID DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | ☐ Change | | |
| TITLE | P SERVICE OFFICE OF THE PROPERTY OF THE PROPER | ☐ DELETE | 1.1 TITE | | | | | | |
| NAME (| FRYATT, GERALD T | | 1.2 NA | | | | | | 1 |
| STREET ADDRESS | 410 HOPE STREET | | | REETADORES | S | | | | |
| CITY-ST-ZIP | TARPON SPRINGS FL 34689 | DELETE | 1.4 CIT | Y-ST-ZIP | + | <u> </u> | Change | Addition | 1 |
| TITLE | ST LICEUMS LANE M | | 2.1 III | | | | | | |
| NAME | HOPKINS, JANE M. | | E . | REET ADDRE | | | ي مستحدي | | 1. |
| STREET ADDRESS | ** 410 HOPE STREET ********************************** | | • | Y-ST-ZIP | | | | | 1 |
| CITY-ST-ZIP TITLE | TARPON SPRINGS PL | ☐ DELETE | 3.1 TET | | | | ☐ Change | ● ☐ Addition | 1 |
| NAME] | | | 3.2 NA | | | • | | | |
| STREET ADDRESS | | | 1 | REET ADORE | ss | | | | 1 |
| CITY-ST-ZIP | | | | Y-ST-ZIP | | | | | |
| TITLE | | ☐ DELETE | 4.1 TITI | | | | ☐ Change | Addition | 1 |
| NAME | | | 4. 2 NA | ME | | | | | 1 |
| STREET ADDRESS | | | 4.3 STF | REET ADDRE | ss | | | | 1 |
| CITY-ST-ZIP | | | 1 | Y-ST-ZIP | | | | | |
| TITLE | | ☐ DELETE | 5.1 TITI | | | | ☐ Change | Addition | |
| NAME | | | 5.2 NA | ME | | | | | |
| STREET ADDRESS | | | 5.3 ST | REET ADDRE | ss | | | | 1 |
| CITY-ST-ZIP | | | 5.4 CIT | Y-ST-ZIP | | | | | |
| TITLE | | ☐ DELETE | 6.1 TIT | LE | | | Change | Addition | |
| NAME | | | 6.2 NA | ME | | • | | | |
| STREET ADDRESS | | | 6.3 STI | REET ADDRE | 38 | | | | |
| CITY-ST-ZIP | | | 6.4 CIT | Y+ST-ZIP | - | | | | |

14. I hereby certify that the information supplied with this filing 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 application of the corporation of the corpo

SIGNATURE: