FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

1. Corporation Name

DOCUMENT # P960600 84333

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90049 043 ***150.00

FRIZZI DUNN INC		_
Principal Place of Business Mailing Address		
CLO BRADENTON HERALD		
10) MANATEE AUE W		DO NOT WRITE IN THIS SPACE
C/O BRADENTON HERALD 102 MANATEE AUE W BRADENTON FI 34205		3. Date Incorporated or Qualifed
26 Suite, Apt. #, etc. Suite, Apt. #, etc.		
3uile, Apt. #, etc.		5. Certificate of Status Desired
City & State City & State		
28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country Zip	Country	8. This corporation owes the current year Intangible
	30	Personal Property Tax.
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
-	81 Name	
DUNN, FRANCIS F	82 Street Addr	ress (P.O. Box Number is Not Acceptable)
102 MANATEE AVE W	62 Street Addr	ess (P.O. Box Number is Not Acceptable)
-	83	
BRADENTON FI 34205		
	84 City	FI 85 Zip Code
	F DUNN Registered Agent signature required	
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PRES	1.1 TITLE	☐ Change ☐ Addition
NAME FRANCIS F DUNN STREET ADDRESS 102 MANATEE ANE W CITY-ST-ZIP BRADENTON F1 34205	1.2 NAME	
STREET ADDRESS 102 MANATEE ADE	1.3 STREET ADDRESS	
TITLE BRADEWION 1-1 34 263	14 CITY-ST-ZIP	☐ Change ☐ Addition
	2.1 TITLE	☐ Change ☐ Addition
NAME	2.2 NAME	
STREET ADDRESS	2.3 STREET ADDRESS	
CITY-ST-ZIP DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	☐ Change ☐ Addition
NAME	32 NAME	
STREET ADDRESS	3.3 STREET ADDRESS	
CITY-ST-ZIP	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	54 CITY-ST-ZIP	
TITLE DELETE	61 TITLE	☐ Change ☐ Addition
NAME	6.2 NAME	
STREET ADDRESS	6.3 STREET ADDRESS	
CITY OT ZID	6.4 CITY-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 an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)