


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000052038 1. Entity Name FRISCH FAMILY INVESTMENTS, INC.	
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Principal Place of Business 1741 W. BEAVER ST. JACKSONVILLE, FL 32209	Mailing Address PO BOX 41430 JACKSONVILLE, FL 32203-1430 US
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DO NOT WRITE IN THIS SPACE



04212007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3544715	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRISCH, HANS
1741 W. BEAVER ST.
JACKSONVILLE, FL 32209

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CVAD FRISCH, HANS 1741 W. BEAVER ST. JACKSONVILLE, FL 32209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD FRISCH, BENJAMIN P 1741 W. BEAVER ST. JACKSONVILLE, FL 32209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FRISCH, E. KARL 1741 W. BEAVER ST. JACKSONVILLE, FL 32209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment, with an address, with all other like empowered.

SIGNATURE:  HANS FRISCH 4/25/07 (904) 354-2533
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #