

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91421 007 ***150.00

DOCUMENT # P98000072557



1. Entity Name
FRANBO, INC.

Principal Place of Business
PO BOX 3639
WINTER HAVEN FL 33885-3639

Mailing Address
PO BOX 3639
WINTER HAVEN FL 33885-3639



2. Principal Place of Business
6656 PRINCETON DR. NE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
WINTER HAVEN FL

City & State

4. FEI Number **59-3527780**

Applied For
Not Applicable

Zip **33881** Country **POLK**

Zip Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BORCHGREVINK, VALDEMAR
2925 E. LAKE HARTRIDGE DR.
WINTER HAVEN FL 33881

Name
BORCHGREVINK, VALDEMAR
Street Address (P.O. Box Number is Not Acceptable)
6656 PRINCETON DR. NE

City **WINTER HAVEN** State **FL** Zip Code **33881**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **BORCHGREVINK, FRANCES R**
STREET ADDRESS **2925 E. LAKE HARTRIDGE DR.**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE **PD** ☒ Change ☐ Addition
NAME **BORCHGREVINK, FRANCES R**
STREET ADDRESS **6656 PRINCETON DR NE**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE **VP** ☐ Delete
NAME **BORCHGREVINK, VALDEMAR**
STREET ADDRESS **2925 E. LAKE HARTRIDGE DR.**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE **VP** ☒ Change ☐ Addition
NAME **BORCHGREVINK, VALDEMAR**
STREET ADDRESS **6656 PRINCETON DR NE**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 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: **Frances R. Borchgrevink** **FRANCES R. BORCHGREVINK** 4/25/03 863-224-1080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)