

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 21, 2004 8:00 am
Secretary of State

09-21-2004 90001 013 ***150.00

DOCUMENT # P99000111894 1. Entity Name FRITZ REAL ESTATE HOLDINGS, INC.			
Principal Place of Business 498 CARMEL DRIVE FT. WALTON BEACH, FL 32547		Mailing Address 498 CARMEL DRIVE FT. WALTON BEACH, FL 32547	
2. Principal Place of Business 1186 N. Eglin Pkwy Suite, Apt. #, etc.		3. Mailing Address PO BOX 478 Suite, Apt. #, etc.	
City & State Shalimar, FL Zip 32579		City & State Shalimar, FL Zip 32579	
Country USA		Country USA	
4. FEI Number 59-3613466		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fees Required	
6. Name and Address of Current Registered Agent FRITZ, KENNETH L 498 CARMEL DRIVE FT. WALTON BEACH, FL 32547		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 32 Shalimar Dr City Shalimar FL Zip Code 32579	
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. Kenneth L Fritz SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P NAME FRITZ, KENNETH L STREET ADDRESS 498 CARMEL DR CITY-ST-ZIP FORT WALTON BEACH, FL 32547	☐ Delete	TITLE Change NAME 1186 N. Eglin Pkwy STREET ADDRESS Shalimar, FL 32579 CITY-ST-ZIP 32579	☒ Change ☐ Addition
TITLE ST NAME FRITZ, THERESA STREET ADDRESS 498 CARMEL DR CITY-ST-ZIP FORT WALTON BEACH, FL 32547	☐ Delete	TITLE Change NAME 1186 N. Eglin Pkwy STREET ADDRESS Shalimar, FL 32579 CITY-ST-ZIP 32579	☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition
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: Kenneth Fritz 5.31.04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

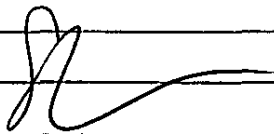
Attachment

24085871

P96000072154

TO: State of Florida
Division of Corporations,

Please Accept my sincere
apologies for filing this so
late. I had intentions of
sending it before the hurricane,
but I had to leave town.
When I got back, I had to
get my business up and
running again and kind of
forgot about the report. My
record will show that I have
never paid this report late.
I would be happy to pay the
penalty, but funds are extremely
tight right now. Thank you for
your consideration and please
contact me for further information.



Thank You:
Stuart Jones