

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 09, 2000 08:00 AM

Secretary of State

DOCUMENT # S65593

1. Entity Name
FRC ENTERPRISES, INC.

Principal Place of Business

2198 MAIN ST
SUITE 301
SARASOTA FL
34237 US

Mailing Address

2198 MAIN ST
SARASOTA FL
34237 US

2. Principal Place of Business

2198 MAIN ST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

65-0271187

Applied For

Not Applicable

Zip
34237

Country
US

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JAENSCH PETER J
2198 MAIN ST
SUITE 301
SARASOTA FL
34237 US

7. Name and Address of New Registered Agent

Name
JAENSCH PETER J
Street Address (P.O. Box Number is Not Acceptable)
2198 MAIN ST
City
SARASOTA FL Zip Code
34237

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

03/09/2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE V ☐ Delete
NAME JAENSCH PETER J
STREET ADDRESS 2198 MAIN ST
CITY-ST-ZIP SARASOTA FL 34237

TITLE DP ☐ Delete
NAME CZOMPO, FREDDY
STREET ADDRESS 2198 MAIN ST
CITY-ST-ZIP SARASOTA FL 34237

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER J. JAENSCH

VP 03/09/2000