FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S72178 1. Corporation Name

FRAZIER ENTERPRISES OF INDIAN RIVER COUNTY, INC.

FILED Feb 19, 1999 8:00am **Secretary of State**

02-19-1999 90049 048 ***150.00



Principal Place	e of Business	Mailing Address				1		
31 ROYAL PALE	M BOULEVARD	31 ROYAL PALM BOULEVARD VERO BEACH FL 32960						
VERO BEACH F	FL 32960					DO NOT WRITE IN THIS SPACE		
						3. Date incorporated or Qualifed		
						08/09/1991		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For		Applied For
21		26				65-0277392	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing	\$5.00	0 May Be
一 	5	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip Cou				8. This corporation owes the current year In	 itangible	
24	25	29	30			Personal Property Tax.	Yes	□No
24	9. Name and Address of Current	1-1				10. Name and Address of New Registered	Agent	
EDY.	ZIED IOAN E			81	Name	TO DO THE STATE OF	in the first	1 1
	ZIER, JOAN F. OYAL PALM BOULEVARD			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		1
	O BEACH FL 32960			83				
				84	City	· FI	85 Zip	p Code
				<u> </u>	<u> </u>			its registered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was a	utnorize	30 DV	the corporat	poration submits this statement for the purpose o ion's board of directors. I hereby accept the appo	intment as	registered
SIGNATURE						ed when reinstating) DATE	-	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered					nt signature requir	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	TORS IN 12
TITLE	PTD	DELETE		mr.E		ADDITIONO/OTATOES TO OTT ISENO.	Change	
	FRAZIER, JOAN F.		1	NAME				
NAME	31 ROYAL PALM BOULEVARD				TADDRESS			
STREET ADDRESS	VERO BEACH FL			CITY-S	1			
CITY-ST-ZIP TITLE	SD SD	☐ DELETE	_	TITLE			Change	e Addition
NAME	FRAZIER, WILLIAM H.			NAME	-			}
	31 ROYAL PALM BOULEVARD				TADDRESS	and the second s	2	
STREET ADDRESS	VERO BEACH FL			CITY-S		1		
CITY-ST-ZIP TITLE	VERO BEROTTIE	☐ DELETE	_	TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	e Addition
		_		NAME				İ
NAME					TADDRESS			
STREET ADDRESS			ŀ	CITY-9				
CITY-ST-ZIP TITLE		☐ DELETE	_	TITLE			Change	e
NAME				NAME	1			
STREET ADDRESS					TADORESS			
				CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE		TITLE			Change	e
NAME		_		NAME				
STREET ADDRESS			5.3	STREE	TADDRESS			
				CITY-S				
CITY-ST-ZIP TITLE		☐ DELETE		TITLE			☐ Changi	e Addition
NAME			6.2	NAME				
			6.3	STREE	T ADDRESS			Į
STREET ADDRESS				cmv o	770			

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: