

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Sep 07, 2005 08:00 AM
Secretary of State**

DOCUMENT # S81882

1. Entity Name
FRAMES BY THE THOUSAND'S, INC.



Principal Place of Business

**110 DEARBORN ST.
W. DEARBORN ST.
ENGLEWOOD, FL 34223 US**

Mailing Address

**110 DEARBORN ST.
W. DEARBORN ST.
ENGLEWOOD, FL 34223 US**



08262005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0287868

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LEE, H. GREG
2014 FOURTH ST.
SARASOTA, FL 34237**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1000000377899
09/07/05-80018-022 550.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HESS, BEVERLY J.
STREET ADDRESS	2310 PALMETTO ST.
CITY-ST-ZIP	NOKOMIS, FL
TITLE	D
NAME	HESS, DANIEL
STREET ADDRESS	2310 PALMETTO ST.
CITY-ST-ZIP	NOKOMIS, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/2/05 (941) 474-4413
Date Daytime Phone #