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FILED
May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V08705

(8)

1. Corporation Name

FRAYNE ENTERPRISES, INC.



Principal Place of Business

6402 W LINEBAUGH AVE
TAMPA FL 33625-4959

Mailing Address

6402 W LINEBAUGH AVE
TAMPA FL 33625-4959

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

01/22/1992

3a. Date of Last Report

06/17/1996

4. FEI Number

59-3102521

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

MORTON, REBECCA F.
6402 W LINEBAUGH AVE
TAMPA FL 33625-4959

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME REBECCA FRAYNE MORTON
STREET ADDRESS 6402 WEST LINEBAUGH AVE
CITY-ST-ZIP TAMPA FL 59

TITLE DT ☐ DELETE

NAME FRAYNE, DENNIS
STREET ADDRESS 6402 WEST LINEBAUGH AVE
CITY-ST-ZIP TAMPA FL 59

TITLE DS ☐ DELETE

NAME FRAYNE, DOUGLAS
STREET ADDRESS 6402 WEST LINEBAUGH AVE
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME FRAYNE, JOSEPH
STREET ADDRESS 6402 WEST LINEBAUGH AVE
CITY-ST-ZIP TAMPA FL 59

TITLE D ☐ DELETE

NAME FRAYNE, JOHN
STREET ADDRESS 6402 WEST LINEBAUGH AVE
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE

NAME FRAYNE, JEFFERY
STREET ADDRESS 6402 WEST LINEBAUGH AVE.
CITY-ST-ZIP TAMPA FL 33625-4959

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE PD ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE TD ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE SD ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

Dennis Frayne 4/22/97 (813)961-7171

CR2E034 (9/96)