

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000078001

FILED
Mar 11, 2005
Secretary of State

Entity Name: FRL, INC.

Current Principal Place of Business:

1621 SW 19TH AVE
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

1621 SW 19TH AVE
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 59-3277113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, JEFFREY M
5500 SE 8TH ST
OCALA, FL 34471 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REED, JEFFREY M
Address: 5500 SE 8TH ST
City-St-Zip: Ocala, FL 34471

Title: V () Delete
Name: FABIAN, JOHN E
Address: 5508 SE 8TH ST
City-St-Zip: Ocala, FL 34471

Title: T () Delete
Name: LEWIS, EDWARD L
Address: 4975 SE 38TH ST
City-St-Zip: Ocala, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY M. REED

P

03/11/2005

Electronic Signature of Signing Officer or Director

_____ Date