


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 436941

1. **Entity Name**
LEY LIVESTOCK, INC.



Pr **Principal Place of Business** Mailing Address
 PI **PO BOX 118**
 C **CHIPLEY FL 32428**



2. **Principal Place of Business** 3. **Mailing Address**

4. **Apt. #, etc.** Suite, Apt. #, etc

1st MOORE CR2E034 (10/05)

5. **State** City & State

4. **FEI Number** **59-1487084** Applied For
 Not Applicable

Country Zip Country

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

6. **Name and Address of Current Registered Agent**

NEEL, JEAN B
656 4TH ST
CHIPLEY FL 32428

7. **Name and Address of New Registered Agent**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. I, 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: *Jean B. Neel* DATE: **1-21-06**

(NOTE: Registered Agent signature required when resigning)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Check Payable to Florida Department of State

9. **Election Campaign Financing** **\$5.00** May Be
 Trust Fund Contribution. **Added to Fees**

10. **OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
P	NEEL, JEAN B	656 N 4TH ST	CHIPLEY, FL 00000	<input type="checkbox"/>
S	COBB, DANA N	3123 WESLEY WAY	DOTHAN AL	<input type="checkbox"/>
V	MYERS, KITTY N	3121 CLUB DR	MARIANNA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 01/30/06-80014-012 150.00

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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, unchanged, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jean B. Neel* 1-21-06