

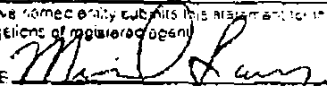
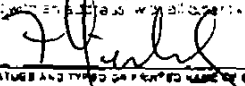
02/21/2006 11:42 HOT-TAMPA → 12053804360
02/21/2006 10:01 ATTORNEY, WHITE PA ABLE - 10132481

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90374 009 ***150.00

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**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 314598			
1. Entity Name YEILDING-TYSON INCORPORATED			
Principal Place of Business 144 INDUSTRIAL DR. BIRMINGHAM, AL 35211		Mailing Address 144 INDUSTRIAL DR. BIRMINGHAM, AL 35211	
2. Principal Place of Business		3. Mailing Address	
Suite Apt. #, etc.		Suite Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI NUMBER 59-1198654		Appoint For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BETHEL MIKE 5438 VERNON RD JACKSONVILLE, FL 32209		7. Name and Address of New Registered Agent Name Mike Lavelly Street Address (P.O. Box Number's Not Applicable) 1913 Tilgham Street City Tampa State FL Zip Code 33605	
8. The above named entity certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am ignorant with, and accept the obligations of registered agent.			
SIGNATURE  Signature of Registered Agent (Print Name and Agency Name in Block)		SIGNATURE Mike Lavelly Signature of Registered Agent (Print Name and Agency Name in Block)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Section Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '05	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD YEILDING, FLETCHER 144 INDUSTRIAL DR. BIRMINGHAM, AL	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	S WALTON, J M 144 INDUSTRIAL DR BIRMINGHAM, AL	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing complies with the requirements contained in Chapter 134, 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 of the corporation, and that the information is not being furnished by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report, with all changes indicated.			
SIGNATURE: 		(205) 949-4105	