2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 399937

FERLISE, MILTON,

SARASOTA, FL

1740 OAK LAKES DR

Name:

Address:

City-St-Zip:

FILED Apr 10, 2006 Secretary of State

Entity Name: FANCEE FARMS, INC.					
Current Principal Place of Business:			New Principal Place of Business:		
	KENNEL RD A, FL 34240				
Current Mailing Address:			New Mailing Address:		
	KENNEL RD A, FL 34240				
FEI Number:	: 59-1396043	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
FERLISE, FELIX 2057 MISTY SUNRISE TR SARASOTA, FL 34240 US			FERLISE, FELIX 2029 MISTY SUNRISE TR SARASOTA, FL 34240 US		
The above in the State	named entity set of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				04/10/2006	
	Electron	ic Signature of Registered Age	ent	Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () FERLISE, FELI 2029 MISTY SU SARASOTA, FL	JNRISE TR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () FERLISE, STEI 1740 OAK LAKI SARASOTA, FL	ES DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () FERLISE,ROSA 1740 OAK LAKI SARASOTA, FL	ES DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	T ()	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

SIGNATURE: FELIX FERLISE **PRES** 04/10/2006