2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006
Secretary of State

DOCUMENT# 852873

Entity Name: FRAZEE, INC.

Current Principal Place of Business:

560 LIONS CLUB DR.
MABLETON, GA 30126 US

New Principal Place of Business:

Current Mailing Address:

560 LIONS CLUB DR.
MABLETON, GA 30126 US

New Mailing Address:

FEI Number: 58-1277309 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE. 4
WESTON, FL 33331 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: CEOD ( ) Delete
Name: FRAZEE, CHARLES J.,
Address: 2860 ROCKY PT. RD.
City-St-Zip: MALABAR, FL 32950 US

Title: ST ( ) Delete
Name: HULSEY, JANICE N.,
Address: 511 HUNNICUTT RD.
City-St-Zip: MABLETON, GA 30126 US

Title: V ( ) Delete
Name: BENNETT, LAWRENCE C.,
Address: 28 JUNIPER LANE
City-St-Zip: CARTERSVILLE, GA 30120 US

Title: P ( ) Delete
Name: WARD, DANIEL G.,
Address: 404 CLUBVIEW DR.
City-St-Zip: WOODSTOCK, GA 30189 US

Title: D ( ) Delete
Name: FRAZEE, NORMA,
Address: 2860 ROCKY PT. RD.
City-St-Zip: MALABAR, FL 32950 US

Title: EV ( ) Delete
Name: FRAZEE, CLARK W
Address: 5527 BROOKLINE DRIVE
City-St-Zip: ORLANDO, FL 32819 US

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:

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 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.

SIGNATURE: JANICE N. HULSEY ST 04/07/2006

Electronic Signature of Signing Officer or Director Date