

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F34921

Entity Name: YONGE PROPERTIES, INC.

FILED
Jul 27, 2007
Secretary of State

Current Principal Place of Business:

600 SE 48TH AVENUE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

600 SE 48TH AVENUE
OCALA, FL 34471 US

New Mailing Address:

FEI Number: 59-2094510

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, BETSY Y
1347 SE 18TH PL.
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: YONGE, NANCY R,
Address: 520 SW 28TH ST
City-St-Zip: OCALA, FL 34474

Title: ST () Delete
Name: ROBERTS, BETSY Y.,
Address: 1347 SE 18TH PL
City-St-Zip: OCALA, FL 34471

Title: VP () Delete
Name: YONGE, LAURIE
Address: 600 SE 48 AVE
City-St-Zip: OCALA, FL 34471

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 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: LAURIE A YONGE

VP

07/27/2007

Electronic Signature of Signing Officer or Director

Date