

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000004981

Entity Name: M. G. DYESS INC.

FILED  
Jan 20, 2006  
Secretary of State

## Current Principal Place of Business:

PO BOX 520  
7159 HWY 35 S  
BASSFIELD, MS 39421

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 520  
BASSFIELD, MS 39421

## New Mailing Address:

FEI Number: 64-0589047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CEO ( ) Delete  
Name: DYESS, M G CEO  
Address: PO BOX 520  
City-St-Zip: BASSFIELD, MS 39421

Title: PRES ( ) Delete  
Name: DYESS, M. GRANT PRESIDE  
Address: 7159 HWY 35 S  
City-St-Zip: BASSFIELD, MS 39421

Title: V-P ( ) Delete  
Name: DYESS, MICHAEL G VICE-PR  
Address: 7159 HWY 35 S  
City-St-Zip: BASSFIELD, MS 39421

Title: V-P ( ) Delete  
Name: DYESS, RICKY N VICE-PR  
Address: 7159 HWY 35 S  
City-St-Zip: BASSFIELD, MS 39421

Title: SEC ( ) Delete  
Name: MCRANEY, JENA D SEC-TRE  
Address: 7159 HWY 35 S  
City-St-Zip: BASSFIELD, MS 39421

## 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:

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: M. GRANT DYESS

PRES

01/20/2006

Electronic Signature of Signing Officer or Director

Date