2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

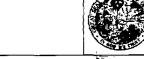
DOCUMENT # G11703

1. Entity Name 🅦

GREENE, DYCUS & CO., P.A.

Principal Place of Business C/O WILLIAM T. ROYSTER 205 N. ELM AVE. SANFORD, FL 32771-1274

SANFORD, FL 32771



FILED Jan 24, 2006 08:00 AM Secretary of State



C/O WILLIAM T. ROYSTER

205 N, ELM AVE. SANFORD, FL 32771-1274



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01122006 No Chg-P CR2E034 (11/05)

4 .	FEI Number 59-2235346	 	Applied For Not Applicable
5.	Certificate of Status Desired	\$8.75 Additional	

\$8.75 Additional Fee Required

Daytime Phone #

ROYSTER, WILLIAM T 205 N ELM AVENUE

DO NOT WRITE IN THIS SDACE

			IN THIS STACE			
	named entity submits this statement for the pions of registered agent.	urpose of changing its registered office of	r registered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typed or printed name of registered agent and title li	applicable (NOTE Registered Agent signa	ture required when reinstating)	DATE		
		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees			
10. Title NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT CPD DYCUS, JAMES R 2305 MELLONVILLE AVE SANFORD, FL	TORS		-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	TD ROYSTER, WILLIAM 118 LARKWOOD DR SANFORD, FL			U00000399809 02/01/06-80028-001 150.00		
NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-\$T-ZIP			IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 signature shall have the same legal effect as it made under cath, 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						