## **2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # H51140** 1. Entity Name YOUNG & YOUNG PROPERTIES, INC. Principal Place of Business Mailing Address 3639 CORTEZ RD W 3639 CORTEZ RD W STE 104 **STE 216** BRADENTON, FL 34210 BRADENTON, FL 34210 02142007 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2525642 6. Name and Address of Current Registered Agent OZARK, DAMIAN M ESQ. 2808 MANATEE AVE. W BRADENTON, FL 34205

## **FILED** Feb 22, 2007 8:00 am Secretary of State

02-22-2007 90001 006 \*\*\*150.00

40022271

CR2E034 (11/05)

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

S. 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. I am familiar with, and accept the obligations of registered agent.    SiGNATURE					
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  10. OFFICERS AND DIRECTORS  TITLE NAME SITER ADDRESS CITY-57-2P TITLE NAME NAME NAME NAME NAME NAME NAME NAM	the obligations of registered agent.  SIGNATURE				
After May 1, 2007 Fee will be \$550.00  Trust Fund Contribution.  Added to Fees  10. OFFICERS AND DIRECTORS  IIILE NAME PYOUNG, CLAUDE H. 605 MONTEZUMA DR BRADENTON, FL 34209  IIILE NAME SIREET ADDRESS CITY-ST-2P  IIILE NAME SIREET ADDRESS CITY-ST-2P  IIILE NAME SIREET ADDRESS CITY-ST-2P  IIILE TITLE NAME SIREET ADDRESS CITY-ST-2P  IIILE TITLE NAME SIREET ADDRESS CITY-ST-2P  IIILE TITLE T	Signature, typed or printed name of registered agent and titl	e if applicable. (NOTE: Registered	Agent signature	e required when reinstating)	DATE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				\$5.00 May Be Added to Fees	
NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TI		CTORS			
NAME STREET ADDRESS CITY-ST-2IP  TITLE NAME STREET ADDRESS CITY-ST-2IP	NAME YOUNG, CLAUDE H. STREET ADDRESS 605 MONTEZUMA DR				
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STREET ADDRESS CITY-ST-ZIP  12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information	NAME STREET ADDRESS CITY-ST-ZIP				

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clark N. YOUNG . CLAUDE H. YOUNG SIGNATURE AND TWEE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-07