

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K55194

FILED
Apr 04, 2006
Secretary of State

Entity Name: FUDPUCKER'S PROPERTIES, INC.

Current Principal Place of Business:

20001-A EMERALD COAST PARKWAY
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

20001-A EMERALD COAST PARKWAY
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-2922611 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EDWARDS, TIMOTHY M
20001-A EMERALD COAST PARKWAY
DESTIN, FL 32541 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: DP () Delete
Name: KROEGER, CHESTER G.,
Address: 606 LAGOON DR
City-St-Zip: DESTIN, FL

Title: DVST () Delete
Name: EDWARDS, TIMOTHY M
Address: 500 WALTON WAY
City-St-Zip: DESTIN, FL

Title: V () Delete
Name: FREY, MICHAEL J
Address: 198 KEL-WIN CIRCLE
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KROEGER, CHESTER G.,
Address: 606 LAGOON DR
City-St-Zip: DESTIN, FL 32541 US

Title: DVST (X) Change () Addition
Name: EDWARDS, TIMOTHY M
Address: 500 WALTON WAY
City-St-Zip: DESTIN, FL 32550 US

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: TIMOTHY M EDWARDS

DVST

04/04/2006

Electronic Signature of Signing Officer or Director

Date