2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 09, 2006 08:00 AN

DOCUMENT # K82895 1. Entity Name FOXDALE MANAGEMENT, INC.			_	Sec	cretary	of State
2105 BRUCE ST	Mailing Address 115 AMHERST CRANSTON, RI 02920 US					
DO NOT WRITE II		CE	01062006 4. FEI Number 59-2948		CR2E034 (
6. Name and Address of Current Registered Agent DAWLEY, RONALD C 2128 BRUCE ST. LAKELAND, FL 33801		DO NOT WRITE IN THIS SPACE				
8. 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 a the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when refinstating) DATE PILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees					ar with, and accept	
10. OFFICERS AND DIRE TITLE P NAME DAWLEY, RONALD C STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33801 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	CTORS		_	000000 02./20/06 NOT W	RITE	23 150.00
STREET ADDRESS CITY-ST-ZIP TIFLE	 					·

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 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.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF FICE OR DIRECTOR