


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L94922
 1. Entity Name
J. W. FEYL ACCOUNTING SERVICES, INC.



Principal Place of Business
**14011 MIDDLETON WAY
 TAMPA, FL 33624**

Mailing Address
**14011 MIDDLETON WAY
 TAMPA, FL 33624**



03052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3027177

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**FEYL, JOHN W.
 17011 MIDDLETON WAY
 SUITE 105
 TAMPA, FL 33624**

**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 accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

1100000463640
 03/21/06-80084-009 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT FEYL, JOHN W 14011 MIDDLETON WAY TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS FEYL, LINDA I. 14011 MIDDLETON WAY TAMPA, FL 33624
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
 IN THIS SPACE**

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 7 changed, or on an attachment with an address with all other like empowered.

SIGNATURE: John W Feyl President 3/5/06 (813) 962-4227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #