2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050251

Entity Name: FYE PROPERTIES, INC.

FILED Jan 26, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	REET NORTH SBURG, FL 33			REET NORTH #18 SBURG, FL 33709	US	
Current Mailing Address:			New Mailir	New Mailing Address:		
	REET NORTH SBURG, FL 33			REET NORTH #18 SBURG, FL 33709	US	
FEI Number:	59-3735567	FEI Number Applied For ()	FEI Number Not Appli	cable () Certific	ate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
TICE, LETTIE 4720 49 ST N #18 SAINT PETERSBURG, FL 33709 US 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 DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () C GILLESPIE, JOHI 1747 26TH AVEN ST PETERSBURG	UE NORTH	Title: Name: Address: City-St-Zip:	P (X) Change GILLESPIE, JOHN 16500 198TH TRAIL O BRIAN, FL 32701 US	() Addition	
Title: Name: Address: City-St-Zip:	S () D TICE, LETTIE 4604 49TH STRE ST PETERSBURG		Title: Name: Address: City-St-Zip:	S (X) Change TICE, LETTIE 4604 49TH STREET NOF ST PETERSBURG, FL 3	RTH #18	
Title: Name: Address: City-St-Zip:	VP () C GILLESPIE, BILL 4604 49TH ST. N SAINT PETERSBI	#18	Title: Name: Address: City-St-Zip:	VP (X) Change GILLESPIE, BILL 4604 49TH STREET NO SAINT PETERSBURG, F	RTH #18	
Title: Name: Address: City-St-Zip:	S () C TICE, LETTIE 4604 49TH ST N., SAINT PETERSBI		Title: Name: Address: City-St-Zip:	T (X) Change TICE, LETTIE 4604 49TH STREET NOF ST PETERSBURG, FL 3	RTH #18	
Title: Name: Address: City-St-Zip:	T (X) E TICE, LETTIE 4604 49TH ST N., SAINT PETERSB		Title: Name: Address: City-St-Zip:	() Change	() Addition	

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: S/LETTIE TICE S 01/26/2006