

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111004

Entity Name: AILEEN M. TYE, PA

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

4171 ATTAWAY LN
PORT CHARLOTTE, FL 33981

New Principal Place of Business:

5309 KEMPSON LANE
PORT CHARLOTTE, FL 33981

Current Mailing Address:

4171 ATTAWAY LN
PORT CHARLOTTE, FL 33981

New Mailing Address:

5309 KEMPSON LANE
PORT CHARLOTTE, FL 33981

FEI Number: 11-3661678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TYE, AILEEN
4171 ATTAWAY LN
PORT CHARLOTTE, FL 33981 US

Name and Address of New Registered Agent:

TYE, AILEEN M
5309 KEMPSON LANE
PORT CHARLOTTE, FL 33981 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: AILEEN M TYE

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TYE, AILEEN M
Address: 4171 ATTAWAY LN
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TYE, AILEEN M
Address: 5309 KEMPSON LANE
City-St-Zip: PORT CHARLOTTE, FL 33981

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: AILEEN M TYE

D

01/04/2007

Electronic Signature of Signing Officer or Director

Date