

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000123821

Entity Name: FCM PROPERTIES, INC.

FILED
Mar 29, 2007
Secretary of State

Current Principal Place of Business:

5221 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

5221 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207

New Mailing Address:

PO BOX 10605
JACKSONVILLE, FL 32247

FEI Number: 20-5621233

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT ABRAHAM REITER MCCORMICK & GREENE PA
50 NORTH LAURA STREET SUITE 2750
JACKSONVILLE, FL 32202 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: D () Delete
Name: BOST, HARLAN
Address: 1954 SAN MARIE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Delete
Name: BOST, PATRICIA Q
Address: 1954 SAN MARIE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BOST, HARLAN
Address: 1954 SAN MARIE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

Title: DS (X) Change () Addition
Name: BOST, PATRICIA Q
Address: 1954 SAN MARIE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32217

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: JOHN M. LOCHNER

CFO

03/29/2007

Electronic Signature of Signing Officer or Director

Date