2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000078592

Entity Name: YIELD MANAGEMENT TRICORP. INC.

FILED Mar 24, 2006 Secretary of State

537 SUNSET DR. 175 MARINE STREET NOBLESVILLE, IN 46060 FARMINGDALE, NY 11735

Current Mailing Address: New Mailing Address:

537 SUNSET DR. 175 MARINE STREET

NOBLESVILLE, IN 46060 US FARMINGDALE, NY 11735 US

FEI Number: 35-1972148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

QUINN, DENNIS J M.

1105 MAIN STREET

WINDERMERE, FL 34786

US

WERKLEY, DAVID H

451 SE TRAY TERRACE

PT ST LUCIE, FL 34983

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: DAVID H WERKLEY 03/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: QUINN, DENNIS J M
Address: 7310 WESTPOINTE BLVD., #624

Name: QUINN, DENNIS J M
Address: 1105 MAIN STREET

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: WINDERMERE, FL 34786

Title: PC () Delete Title: PC (X) Change () Addition Name: WERKLEY, DAVID H Name: WERKLEY, DAVID H

Address: 537 SUNSET DRIVE Address: 451 SE TRAY TERRACE City-St-Zip: NOBLESVILLE, IN City-St-Zip: PT ST LUCIE, FL 34983

Title: VDST () Delete Title: () Change () Addition

 Name:
 WHITE, EDWARD
 Name:

 Address:
 14 GARY PLACE
 Address:

 City-St-Zip:
 HUNTINGTON, NY 11743
 City-St-Zip:

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: DAVID H WERKLEY P 03/24/2006