


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 01, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000052989**

1. Entity Name  
**FRONTAGE PROPERTIES, INC.**



Principal Place of Business  
**2515 E. HANNA AVE.**  
**TAMPA, FL 33610**

Mailing Address  
**P O BOX 9658**  
**TAMPA, FL 33674-658 US**

**DO NOT WRITE IN THIS SPACE**



05302006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-3441336</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WILLIAMSON, LEON A JR.**  
**2515 E. HANNA AVE.**  
**TAMPA, FL 33610**

**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**  
**Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JURADO, JAIME 2515 E. HANNA AVE. TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JURADO, KURT D 2515 E. HANNA AVE. TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD JURADO, KEITH M 2515 E. HANNA AVE. TAMPA, FL 33610
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 06/01/06-80002-004 158.75

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

SIGNATURE: *Jaime Jurado* **5/30/06** **(813)238-5010**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #