## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000039477

Entity Name: SOUTH CENTRAL PROPERTIES, INC.

FILED Jan 16, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:		
6610 33RD SARASOTA	ST EAST A, FL 34243					
Current Mailing Address:			New Mailing Addres	New Mailing Address:		
6610 33RD SARASOTA	ST EAST A, FL 34243					
FEI Number:	65-0750922	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:		
	RONEN NTRY LAKES A, FL 34243	LN US				
The above in the State	named entity s of Florida.	submits this statement for the pur	pose of changing its registere	ed office or registered agent, or both,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Agent		Date		
Election Cam	paign Financing	Trust Fund Contribution ( ).				
OFFICERS	AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () DANIEL W CRO 20220 LAREDO LAKEVILLE, MN	AVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP () PAUL CRONEN 5405 COUNTRY SARASOTA, FL	/ LKS LN	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () JOHN M CRONI 4215 74TH AVE SARASOTA, FL	E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	VP () PHILLIP W CRO 16800 GRAYSE WAYZATA, MN	AY BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () CHARLES M OL 15951 HYLAND APPLE VALLEY	DR	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () CRONEN, TIMO 10075 OAKSHO LAKEVILLE, MN	RE DR.	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.

	Flacture Circusture of Circust Officer on Director		Data
SIGNATURE:	DANIEL W. CRONEN	Р	01/16/2006