

2007 FOR PROFIT CORPORATION ANNUAL REPORT


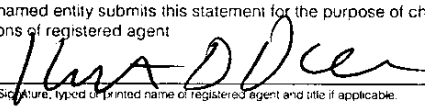
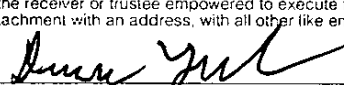
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02062007 Chg-P CR2E034 (12/06)

DOCUMENT # 522000					
1. Entity Name ACE SUPPLY COMPANY					
Principal Place of Business 1202 NORTH MAGNOLIA AVENUE OCALA, FL 32670			Mailing Address 1202 NORTH MAGNOLIA AVENUE OCALA, FL 32670		
2. Principal Place of Business - No P.O. Box # 11625 Walsingham Road			3. Mailing Address 11625 Walsingham Road		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Largo, FL			City & State Largo, FL		
Zip 33778	Country	Zip 33778	Country	4. FEI Number 59-1718909	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALLI, DEAN C. 11625 WALSINGHAM ROAD LARGO, FL 33544			7. Name and Address of New Registered Agent Name Doerr, Kenneth D. Street Address (P.O. Box Number is Not Acceptable) 240 S. Pineapple Ave., 10th Floor City Sarasota FL Zip Code 34236		
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 2/6/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fee 200088062242 02/18/07--01001--019 **150.00			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLI, DEAN 1672 FIELD FARE CT DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Yull, Duncan 11625 Walsingham Road Largo, FL 33778	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD Yull, Anne 11625 Walsingham Road Largo, FL 33778	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  Duncan Yull, President			DATE: 2/6/07 Daytime Phone #		