


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

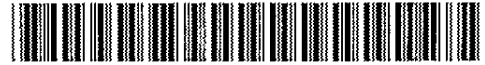
FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # J14714
1. Entity Name
ATON ENTERPRISES, INC.



Principal Place of Business 2135 MAYFAIR WAY TITUSVILLE, FL 32796	Mailing Address 2135 MAYFAIR WAY TITUSVILLE, FL 32796
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DO NOT WRITE IN THIS SPACE



01192007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2674078	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

ATON, RICHARD L.
2135 MAYFAIR WAY
TITUSVILLE, FL 32796

**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 _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ATON, RICHARD L. 2135 MAYFAIR WAY TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ATON, MARY LOU 2135 MAYFAIR WAY TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD WILMS, DEBRA A. 2135 MAYFAIR WAY TITUSVILLE, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/26/07-80009-002 150.00

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IN THIS SPACE**

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: Richard L. Aton (Richard L. Aton) 1-22-07 321-267-0017
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #