


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 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

01152008 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 _____ DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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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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 02/06/08-80044-008 150.00

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: Mary Lou Aton MARY LOU ATON 1/28/08 321-267-0017
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #