

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000095437

FILED
Jan 10, 2007
Secretary of State

Entity Name: AXCON CORPORATION, INC.

Current Principal Place of Business:

5239 SADDLE CREEK TRAIL
MILTON, FL 325723574

New Principal Place of Business:

Current Mailing Address:

5239 SADDLE CREEK TRAIL
MILTON, FL 325723574

New Mailing Address:

FEI Number: 20-1687777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEDICORD, BRIAN K
4812 JACKIE CIRCLE
PACE, FL 32571 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEDICORD, BRIAN K
Address: 4812 JACKIE CIR.
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: DAVIS, MARK
Address: 5239 SADDLE CREEK TRAIL
City-St-Zip: MILTON, FL 325723574

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MARK DAVIS

D

01/10/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date