2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001855

Entity Name: OHIO VALLEY CONVERTING, INC.

FILED Jan 13, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
P.O. BOX BOONEVII	125 LLE, AR 72927			
Current M	lailing Addres	s:	New Mailing Addres	s:
P.O. BOX BOONEVII	125 LLE, AR 72927	,		
FEI Number:	: 55-0712468	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
1200 SOU	PORATION SYS TH PINE ISLAN ION, FL 33324	ID ROAD		
	named entity se of Florida.	ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
SIGNATU	RE:			
Electronic Signature of Registered Age			ent	Date
Election Car	mpaign Financing	Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CP () MOORE, MARIE 2495 W. HWY 1 BOONEVILLE, A	0	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () MOORE, STAN 2495 W. HWY 1 BOONEVILLE, A		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VV () MULLIN, DANIE TOWN & COUN BOONEVILLE, A	TRY	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.

SIGNATURE: DANIELLE MULLIN VP 01/13/2006