## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G03168

Entity Name: N. REX ASHLEY, P.A.

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1044 CASTELLO DR, 106 NAPLES, FL 34103 US			1044 CASTELLO DR, STE # 106 NAPLES, FL 34103	US	
Current M	ailing Addres	ss:	New Mailing Address:		
1044 CASTELLO DR, 106 NAPLES, FL 34103 US			1044 CASTELLO DR, STE#106 NAPLES, FL 34103	US	
FEI Number: 59-2224696 FEI Number Applied For ( )		FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SUITE 106 NAPLES, F The above	TELLO DRIVE S FL 34103 US	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Ag	gent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PS ( ASHLEY, N. R 1044 CASTELL NAPLES, FL 3		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) ASHLEY, NOEI 1029 WESTLA NAPLES, FL 3	KE BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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: N REX ASHLEY PRES 02/24/2009