

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035590

Entity Name: ASH HOLDINGS LLC

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

7137 DOLPHIN BAY BLVD.
PANAMA CITY BEACH, FL 32407 US

New Principal Place of Business:

Current Mailing Address:

7137 DOLPHIN BAY BLVD.
PANAMA CITY BEACH, FL 32407 US

New Mailing Address:

FEI Number: 55-0846562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, CHARLES A JR.
7137 DOLPHIN BAY BLVD.
PANAMA CITY BEACH, FL 32407 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LEE, CHARLES A JR.
Address: 7137 DOLPHIN BAY BLVD.
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

Title: MGR () Delete
Name: SCHWARTZ, CARLTON S
Address: 7105 DOLPHIN BAY BLVD.
City-St-Zip: PANAMA CITY BEACH, FL 32407 US

Title: MGR () Delete
Name: HOGAN, DONALD H
Address: 2433 THOMAS DR. # 109
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

ADDITIONS/CHANGES:

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHARLES A. LEE, JR.

MGR

01/05/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date