2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400006030

Entity Name: AOHE, INC

FILED Jul 15, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2885 ANGUS CIRCLE 1650 WINSTON STREET CANTONMENT, FL 32533 US

Current Mailing Address: New Mailing Address:

P O BOX 22 CANTONMENT, FL 32533

FEI Number: 20-1246379 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUSSELL, MARTHA B GOODMAN, KAREN
948 HWY 29 SOUTH 1650 WINSTON STREET
CANTONMENT, FL 32533 US CANTONMENT, FL 32533 US

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: KAREN GOODMAN 07/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: GOODMAN, KAREN A

Address COODMAN, KAREN A

 Address:
 2885 ANGUS CIRCLE
 Address:
 1650 WINSTON STREET

 City-St-Zip:
 MOLINO, FL 32577 US
 City-St-Zip:
 CANTONMENT, FL 32533 US

Title: VP () Delete Title: VP (X) Change () Addition Name: GOODMAN, RONALD D Name: GOODMAN, RONALD D

 Address:
 2885 ANGUS CIRCLE
 Address:
 1650 WINSTON STREET

 City-St-Zip:
 MOLINO, FL 32577 US
 City-St-Zip:
 CANTONMENT, FL 32533 US

Title: SEC () Delete Title: TREA (X) Change () Addition

Name:RUSSELL, MARTHA BName:KROCK, BRENAAddress:P O BOX 32Address:1821 SOUTHBAY DRCity-St-Zip:CANTONMENT, FL 32533 USCity-St-Zip:PENSACOLA, FL 32506 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN GOODMAN P 07/15/2006