

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004738

FILED  
Feb 13, 2012  
Secretary of State

**Entity Name:** BEAUTY FOR ASHES, INC.

**Current Principal Place of Business:**

1508B MAX HOOKS RD.  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 847  
GROVELAND, FL 34736

**New Mailing Address:**

**FEI Number:** 56-2667906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DARRAH, JANET A  
1219 GREENLEY AVENUE  
GROVELAND, FL 34736 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

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** DARRAH, JANET A  
**Address:** 1219 GREENLEY AVENUE  
**City-St-Zip:** GROVELAND, FL 34736 US

**Title:** VP  
**Name:** DARRAH, MICHAEL M  
**Address:** 1219 GREENLEY AVENUE  
**City-St-Zip:** GROVELAND, FL 34736 US

**Title:** TREA  
**Name:** WHETRO, KERRY  
**Address:** 1678 RIDGEMOOR DRIVE  
**City-St-Zip:** MASCOTTE, FL 34753 US

**Title:** SEC  
**Name:** FITZGIBBON, CINDY  
**Address:** 615 OAK DALE ST.  
**City-St-Zip:** WINDERMERE, FL 34786 US

**Title:** CHAI  
**Name:** WHETRO, PAULA  
**Address:** 1678 RIDGEMOOR DRIVE  
**City-St-Zip:** MASCOTTE, FL 34753 US

I hereby 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 all other like empowered.

**SIGNATURE:** JANET A DARRAH

PRES

02/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date