


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90299 007 ***158.75

DOCUMENT # P00000042636		
1. Entity Name ASHBAUGH ENTERPRISES INC.		

Principal Place of Business 38401 GRAY'S AIRPORT RD. LADY LAKES, FL 32159	Mailing Address 38401 GRAY'S AIRPORT RD. LADY LAKES, FL 32159
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2. Principal Place of Business 12073 193rd Road Suite, Apt. #, etc.	3. Mailing Address 12073 193rd Road Suite, Apt. #, etc.
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City & State Live Oak, FL	City & State Live Oak, FL
Zip 32060	Zip 32060
Country USA	Country USA

6. Name and Address of Current Registered Agent ASHBAUGH, TERRY 38401 GRAY'S AIRPORT RD. LADY LAKES, FL 32159	
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7. Name and Address of New Registered Agent Name: Terry L. Ashbaugh Street Address (P.O. Box Number is not Applicable): 12073 193rd Road City: Live Oak FL Zip Code: 32060	
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8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Terry L. Ashbaugh</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ASHBAUGH, TERRY L 38401 GRAY'S AIRPORT RD LADY LAKE, FL 32159 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ASHBAGH, JANET E 38401 GRAY'S AIRPORT RD LADY LAKE, FL 32159 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Terry L. Ashbaugh 12073 193rd Road Live Oak, FL 32060 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Janet E. Ashbaugh 12073 193rd Road Live Oak, FL 32060 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <i>Janet E. Ashbaugh</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<i>Janet E. Ashbaugh</i> 4/3/06 386-776-2176 Date Daytime Phone #