

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000055538

Entity Name: ASHTON EXCAVATING, INC.

FILED  
Jan 18, 2005  
Secretary of State

**Current Principal Place of Business:**

15440 HAYES RD.  
SPRINGHILL, FL 34610

**New Principal Place of Business:**

15440 HAYS RD.  
SPRING HILL, FL 34610

**Current Mailing Address:**

15440 HAYES RD.  
SPRINGHILL, FL 34610

**New Mailing Address:**

15440 HAYS RD.  
SPRING HILL, FL 34610

FEI Number: 59-3715073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ASHTON, CHARLES  
8331 ECHO LANE  
SPRING HILL, FL 34608 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ASHTON, CHARLES  
Address: 8331 ECHO LANE  
City-St-Zip: SPRING HILL, FL 34608

Title: VD ( ) Delete  
Name: ASHTON, DALE  
Address: 15440 HAYES RD.  
City-St-Zip: SPRINGHILL, FL 34610

Title: D ( ) Delete  
Name: ASHTON, ERIN S  
Address: 13337 WYNN RANCH RD.  
City-St-Zip: HUDSON, FL 34667

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 Section 119.07(3)(i), 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: CHARLES ASHTON

PRES

01/18/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date