2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116055

Entity Name: AN AUCTION INC.

Address:

City-St-Zip:

820 UPLAND DRIVE

PORT ORANGE, FL 32127 US

FILED Apr 27, 2006 Secretary of State

Littly Na	me. AN AUC	ION INC.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	EST AVENUE FL 329224617	US			
Current Mailing Address:			New Mailing Address:		
	EST AVENUE FL 329224617	US			
FEI Number	: 14-1870043	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and	d Address of C	Surrent Registered Agent:	Name and Addres	ss of New Registered Agent:	
984 SOUT	DAVID T ATTY. TH FLORIDA A' DGE, FL 32955	√ENUE			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its regist	tered office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () EMMERSON, K 90 FORREST A COCOA, FL 32	VENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EMMERSON, N 820 UPLAND D		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () EMMERSON, H 4050 N FIESTA PRESCOTT, AZ	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () BROOKS, ASH 1469 S/W IBIS PALM CITY, FL	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T () EMMERSON, K	Delete AREN L	Title: T Name: EMMEF	(X) Change()Addition RSON, KAREN L	

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

Address:

City-St-Zip:

90 FORREST AVENUE

COCOA, FL 32922 US

SIGNATURE: KAREN L. EMMERSON P 04/27/2006