

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116055

FILED
Mar 22, 2007
Secretary of State

Entity Name: AN AUCTION INC.

Current Principal Place of Business:

90 FORREST AVENUE
COCOA, FL 329224617 US

New Principal Place of Business:

Current Mailing Address:

90 FORREST AVENUE
COCOA, FL 329224617 US

New Mailing Address:

FEI Number: 14-1870043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

YOUNG, DAVID T ATTY.
984 SOUTH FLORIDA AVENUE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

KRAMER, ROBERT E ATTY.
555 W GRANADA BLVD.
SUITE A9
ORMOND BEACH, FL 32174 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: ATTY. ROBERT E. KRAMER

03/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EMMERSON, KAREN L
Address: 90 FORREST AVENUE
City-St-Zip: COCOA, FL 32922 US

Title: SVP () Delete
Name: EMMERSON, MARILYN L
Address: 820 UPLAND DRIVE
City-St-Zip: PORT ORANGE, FL 32127 US

Title: VP () Delete
Name: EMMERSON, HARRY S
Address: 4050 N FIESTA WAY
City-St-Zip: PRESCOTT, AZ 86314 US

Title: S () Delete
Name: BROOKS, ASHLEY
Address: 1469 S/W IBIS STREET
City-St-Zip: PALM CITY, FL 34990 US

Title: T (X) Delete
Name: EMMERSON, KAREN L
Address: 90 FORREST AVENUE
City-St-Zip: COCOA, FL 32922 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EMMERSON, KAREN L
Address: 90 FORREST AVENUE
City-St-Zip: COCOA, FL 32922 US

Title: SVPD (X) Change () Addition
Name: EMMERSON, MARILYN L
Address: 4050 N FIESTA WAY
City-St-Zip: PRESCOTT, AZ 86314 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: STACEY-BROOKS, ASHLEY
Address: 3009 SE MORNINGSIDE BLVD
City-St-Zip: PORT ST LUCIE, FL 34952 US

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 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.

SIGNATURE: KAREN L. EMMERSON

PD

03/22/2007

Electronic Signature of Signing Officer or Director

Date