## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000007562

Entity Name: ASCON, INC.

FILED Jun 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14175 NW GAINESVILLE RD REDDICK, FL 32686

Current Mailing Address: New Mailing Address:

14175 NW GAINESVILLE RD REDDICK, FL 32686

FEI Number: 32-0104900 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PERRY, DEBORAH

14185 NW GAINESVILLE RD

REDDICK, FL 32686 US

NAFZIGER, GLORIA D

14185 NW GAINESVILLE RD

REDDICK, FL 32686 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: GLORIA D. NAFZIGER 06/20/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

City-St-Zip:

REDDICK, FL 32686

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

REDDICK, FL 32686

City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: PARKER, BRIAN Name: PARKER, BRIAN K

 Name:
 PARKER, BRIAN
 Name:
 PARKER, BRIAN K

 Address:
 14175 NW GAINESVILLE RD
 Address:
 14175 NW GAINESVILLE RD

 City-St-Zip:
 REDDICK, FL 32686
 City-St-Zip:
 REDDICK, FL 32686

Title: PD () Delete Title: PD (X) Change () Addition Name: MEDEIROS, WENDY SUE Name: MEDEIROS, WENDY SUE Address: 14175 NW GAINESVILLE RD Address: 14185 NW GAINESVILLE RD

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN K. PARKER D 06/20/2007