2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068666

Entity Name: ASHVALE CORPORATION

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 580 CAPE COD LANE ALTAMONTE SPRINGS, FL 32714 **Current Mailing Address: New Mailing Address:** 1330 SCHOONER CT WINTER SPRINGS, FL 32708 FEI Number: 20-1677634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MORRIS, LYNN MORRIS, LYNN 1330 SCHOONER COVE 1330 SCHOONER CT WINTER SPRINGS, FL 32708 US WINTER SPRINGS, FL 32708 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: 04/30/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MORRIS, LYNN C Name: Name: 1330 SCHOONER COURT Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: MORRIS, GARY P Address: Address: 1330 SCHOONER COURT WINTER SPRINGS, FL 32708 City-St-Zip: City-St-Zip:

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: LYNN MORRIS P 04/30/2007