2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000077633

Entity Name: SOUL TRIP INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1365 SOUTH PATRICK DRIVE SATELLITE BEACH, FL 32937 US

Current Mailing Address: New Mailing Address:

1365 SOUTH PATRICK DRIVE SATELLITE BEACH, FL 32937

FEI Number: 20-1293910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KING, CLAY A

1811 HIGHWAY A1A, SUITE 2104
INDIAN HARBOUR BEACH, FL 32937
US

WALKER, AARON B MR.
645 JACKSON COURT
SATELLITE BEACH, FL 32937

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: AARON B. WALKER 04/25/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: P () Delete Title: D (X) Change () Addition Name: KING, CLAY A Name: WALKER, AARON B MR.

Address: 1811 HIGHWAY A1A, SUITE 2104 Address: 645 JACKSON COURT

City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: (X) Change () Addition Title: () Delete Name: DINKINS, CHUCK Name: DINKINS, CHUCK MR. 2503 ILLINOIS STREET 918 GLORIOSA AVENUE Address: Address: ORLANDO, FL 32803 US WINTER PARK, FL 32789 US City-St-Zip: City-St-Zip:

Title: () Delete Title: V () Change (X) Addition

 Name:
 Name:
 LYNN, WILLIAM K MR.

 Address:
 Address:
 222 HANDLEY DRIVE

City-St-Zip: City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: () Delete Title: V () Change (X) Addition
Name: Name: BARNES, REGINALD W MR.

Address: Address: 6612 AMSTERDAM WAY
City-St-Zip: City-St-Zip: WILMINGTON, NC 28405 US

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: AARON B. WALKER D 04/25/2007