

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000077633

Entity Name: SOUL TRIP INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

1365 SOUTH PATRICK DRIVE
SATELLITE BEACH, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

1365 SOUTH PATRICK DRIVE
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 20-1293910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WALKER, AARON B MR.
Address: 645 JACKSON COURT
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: P () Delete
Name: DINKINS, CHUCK MR.
Address: 918 GLORIOSA AVENUE
City-St-Zip: WINTER PARK, FL 32789 US

Title: V () Delete
Name: LYNN, WILLIAM K MR.
Address: 222 HANDLEY DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: V () Delete
Name: BARNES, REGINALD W MR.
Address: 6612 AMSTERDAM WAY
City-St-Zip: WILMINGTON, NC 28405 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
Name:
Address:
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: AARON B. WALKER

D

04/29/2008

Electronic Signature of Signing Officer or Director

Date