

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131797

FILED  
Apr 22, 2006  
Secretary of State

Entity Name: AUXILIARY ESTATE POWER, INC.

## Current Principal Place of Business:

16968 87TH LANE NORTH  
LOXAHATCHEE, FL 33470

## New Principal Place of Business:

## Current Mailing Address:

16968 87TH LANE NORTH  
LOXAHATCHEE, FL 33470

## New Mailing Address:

FEI Number: 20-1679225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEWMAN, JILL BETH  
401 E. LAS OLAS BLVD.  
SITE 1540  
FT. LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

LANE, ROXANNE  
16968 87TH LANE NORTH  
LOXAHATCHEE, FL 33470 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: ROXANNE LANE

04/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LANE, FRANK D  
Address: 16968 87TH LANE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V ( ) Delete  
Name: LANE, ROXANNE G  
Address: 16968 87TH LANE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LANE, ROXANNE  
Address: 16968 87TH LANE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: V (X) Change ( ) Addition  
Name: LANE, FRANK D  
Address: 16968 87TH LANE NORTH  
City-St-Zip: LOXAHATCHEE, FL 33470

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: ROXANNE LANE

P

04/22/2006

Electronic Signature of Signing Officer or Director

Date