

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164358

Entity Name: ASHTIN LAND, INC.

FILED
Jul 10, 2006
Secretary of State

Current Principal Place of Business:

4577 N.W. 6TH STREET STE C
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

4577 N.W. 6TH STREET STE C
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPE, A. BICE ESQ
408 UNIVERSITY AVE STE 406
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

COX, PAULA Z
4577 NW 6TH STREET
SUITE C
GAINESVILLE, FL 32609 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: PAULA Z COX

07/10/2006

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:

Title: D () Delete
Name: COX, WILLIAM L
Address: 4577 N.W. 6TH STREET STE C
City-St-Zip: GAINESVILLE, FL 32609

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COX, WILLIAM L
Address: 4577 N.W. 6TH STREET STE C
City-St-Zip: GAINESVILLE, FL 32609

Title: VP () Change (X) Addition
Name: COX, PAULA Z
Address: 4577 NW 6TH STREET STE C
City-St-Zip: GAINESVILLE, FL 32609

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: PAULA Z COX

VP

07/10/2006

Electronic Signature of Signing Officer or Director

Date