## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000074229

Entity Name: KATHERINE B. ASHLEY, CPA, PA

FILED Jan 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12932 TREE WAY LANE 7406 FULLERTON ST. JACKSONVILLE, FL 32258 US

SUITE 104

JACKSONVILLE, FL 32256 US

**Current Mailing Address:** New Mailing Address:

7406 FULLERTON ST. 12932 TREE WAY LANE

SUITE 104 JACKSONVILLE, FL 32258 US

JACKSONVILLE, FL 32256 US

FEI Number: 20-4955975 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ASHLEY, KATHERINE B ASHLEY, KATHERINE B 12932 TREE WAY LANE 7406 FULLERTON ST.

JACKSONVILLE, FL 32258 US SUITE 104 JACKSONVILLE, FL 32256 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: 01/26/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: ASHLEY, KATHERINE B ASHLEY, KATHERINE B Name: Name:

12932 TREE WAY LANE 7406 FULLERTON ST., SUITE 104 Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 US City-St-Zip: JACKSONVILLE, FL 32256 US

( ) Delete VΡ Title: Title: () Change () Addition

Name: ASHLEY, JAMES S Name: 12932 TREE WAY LANE Address: Address: JACKSONVILLE, FL 32258 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition SEC ( ) Delete SEC ASHLEY, KATHERINE B ASHLEY, KATHERINE B Name: Name:

12932 TREE WAY LANE 7406 FULLERTON ST., SUITE 104 Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32256

Title: TREA () Delete Title: TREA (X) Change ( ) Addition ASHLEY, KATHERINE B ASHLEY, KATHERINE B Name: Name: Address: 12932 TREE WAY LANE Address: 7406 FULLERTON ST., SUITE 104 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32256

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: KATHERINE ASHLEY **PRES** 01/26/2007