

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096330

FILED
Apr 30, 2007
Secretary of State

Entity Name: ENDLESS ASH, INC.

Current Principal Place of Business:

8410 NORTH ARMENIA AVENUE, #1605
TAMPA, FL 33604

New Principal Place of Business:

219 W. LINEBAUGH AVE.
TAMPA, FL 33612

Current Mailing Address:

8410 NORTH ARMENIA AVENUE, #1605
TAMPA, FL 33604

New Mailing Address:

219 W. LINEBAUGH AVE.
TAMPA, FL 33612

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

Name and Address of Current Registered Agent:

SPUNDE, CARL
8410 NORTH ARMENIA AVENUE, #1605
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

SPUNDE, CARL E
219 W. LINEBAUGH AVE.
TAMPA, FL 33612 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: CARL E SPUNDE

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARKER, WILLIAM J
Address: 8410 NORTH ARMENIA AVENUE, #1605
City-St-Zip: TAMPA, FL 33604

Title: DCFO () Delete
Name: SPUNDE, CARL
Address: 8410 NORTH ARMENIA AVENUE, #1605
City-St-Zip: TAMPA, FL 33604

Title: S () Delete
Name: SPUNDE, CARL
Address: 8410 NORTH ARMENIA AVENUE, #1605
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARKER, WILLIAM J
Address: 219 W. LINEBAUGH AVE.
City-St-Zip: TAMPA, FL 33612

Title: DCFO (X) Change () Addition
Name: SPUNDE, CARL E
Address: 219 W. LINEBAUGH AVE.
City-St-Zip: TAMPA, FL 33612

Title: S (X) Change () Addition
Name: SPUNDE, CARL E
Address: 219 W. LINEBAUGH AVE.
City-St-Zip: TAMPA, FL 33612

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: CARL E SPUNDE

DCFO

04/30/2007

Electronic Signature of Signing Officer or Director

Date