2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000034439

Entity Name: ELEVEN ASH, INC.

FILED Mar 17, 2009 Secretary of State

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

3651 EVANS AVENUE 5276 SUMMERLIN COMMONS WAY

#106 #702

FT MYERS, FL 33901 US FT MYERS, FL 33907 US

Current Mailing Address: New Mailing Address:

3651 EVANS AVENUE 5276 SUMMERLIN COMMONS WAY

#106 #702

FT MYERS, FL 33901 US FT MYERS, FL 33907 US

FEI Number: 65-0410505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MCGANN, NANCY MCGANN, NANCY

3651 EVANS AVENUE #106 5276 SUMMERLIN COMMONS WAY

106 702 FORT MYERS, FL 33901 US FORT MYERS, FL 33907 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: NANCY MCGANN 03/17/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD () Delete Title: PVD (X) Change () Addition

Name: MCGANN, NANCY Name: MCGANN, NANCY

 Address:
 3651 EVANS AVE STE 106
 Address:
 5276 SUMMERLIN COMMONS WAY #702

 City-St-Zip:
 FORT MYERS, FL 33901
 City-St-Zip:
 FORT MYERS, FL 33907

Title: ST () Delete Title: ST (X) Change () Addition

Name: MCGANN, NANCY Name: MCGANN, NANCY

Address: 36351 EVANS AVE STE 106 Address: 5276 SUMMERLIN COMMONS WAY #702

City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33907

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: NANCY MCGANN PVD 03/17/2009