## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 12, 2007 08:00 AM te

1630 PARK AVE	Mailing Address 1630 PARK AVE AMELIA ISLAND, FL 32034-19	914	Processoranis Francoscopis F	S	Secretary of Sta
DO NOT WRITE I	N THIS SPA	· -	01102007 4. FEI Numb 59-333	No Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent ASHLEY, KARL C 1630 PARK AVE AMELIA ISLAND, FL 32034-1914		DO NOT WRITE IN THIS SPACE			
8. The above named entity submits this statement for the purpose of changing its registered office or retitle obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and site if applicable  (NOTE Registered Agent signature)  FILE NOWILL FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  Trust Fund Contribution.					
TITLE NAME ASHLEY, KARL C STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	LCTORS			NOT W	RITE

12. I hereby certify that the information subplied with this filling does not duality for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiper or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an officers, with all other like empowered.

Vanc. 4338

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

> KARL C. ASHLBY SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

ton 10 07 904 206-4338

Daytime Phone #