

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003097

FILED
Jul 31, 2005
Secretary of State

Entity Name: ELEVATIONS INC.

Current Principal Place of Business:

7202 SR 235
LACROSSE, FL 32658

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 290
LACROSSE, FL 32658

New Mailing Address:

FEI Number: 59-3323405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PHILLIPS, JANICE E
7202 W SR 235
LACROSSE, FL 32658 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PHILLIPS, ANTHONY
Address: 7202 SR 235
City-St-Zip: LACROSSE, FL

Title: ADS () Delete
Name: PHILLIPS, JANICE
Address: 7202 SR 235
City-St-Zip: LACROSSE, FL

Title: TTR (X) Delete
Name: JOHNSON, GENEVA
Address: 2720 NE 12TH STREET
City-St-Zip: GAINESVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PHILLIPS, ANTHONY
Address: 7202 SR 235
City-St-Zip: LACROSSE, FL

Title: D (X) Change () Addition
Name: PHILLIPS, JANICE
Address: 7202 SR 235
City-St-Zip: LACROSSE, FL

Title: () Change () Addition
Name: () Change () Addition
Address: () Change () Addition
City-St-Zip: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANICE PHILLIPS

D

07/31/2005

Electronic Signature of Signing Officer or Director

Date