2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 553264

Entity Name: ELARE CORPORATION

FILED Apr 21, 2003 Secretary of State

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

16950 VILLAS SQUARE 11305 OAKMONT COURT FT.MYERS, FL 339084522 FT.MYERS, FL 339082821

Current Mailing Address: New Mailing Address:

16950 VILLAS SQUARE 11305 OAKMONT COURT FT.MYERS, FL 339084522 FT.MYERS, FL 339082821

FEI Number: 59-1789711 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:

A. R. EDWARDS

16950 VILLAS SQUARE

FT.MYERS, FL 339084522 US

A. R. EDWARDS

11305 OAKMONT COURT

FT.MYERS, FL 339082821 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: 04/21/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete Name: EDWARDS, A.R.

 Name:
 EDWARDS, A.R.

 Address:
 16950 VILLAS SQUARE

 City-St-Zip:
 FT.MYERS, FL 339084522

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition

Name: EDWARDS, A.R.

Address: 11305 OAKMONT COURT City-St-Zip: FT.MYERS, FL 339082821

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. R. EDWARDS P 04/21/2003