## 2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # 203869

## FILED Jan 16, 2007 8:00 am Secretary of State 01-16-2007 90216 033 \*\*\*150.00

1. Entity Nam	ELI DEVELOPMENT COR	P		01-16-2007 90218 033 ** 130.00
Principal Place 4356 W. RT. PO BOX 767 KANKAKEE, II	17	Mailing Address 4356 W. RT. 17 PO BOX 767 KANKAKEE, IL 60901	US	PANATOS -
Principal Place of Business - No P.O. Box #     3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042007 Chg-P CR2E034 (12/06)
City & State	е	City & State		4. FEI Number Applied For 36-2434931 Not Applicate Not Applicate Applied For Applicate Applied For App
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Curre	nt Registered Agent		7. Name and Address of New Registered Agent
			Name	
AZZAVELL, SAMUEL J 161 BATH CLUB CR SAINT PETERSBURG, FL 33708			Street	Address (P.O. Box Number is Not Acceptable)
:			City	FL Zip Code
	named entity submits this statement	for the purpose of changing its	s registered office	or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE_				
	Signature, typed or printed name of registered age	ent and title if applicable. (NO	TE: Registered Agent sign	titure required when reinstating) DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550	9. Election Campa Trust Fund Con		\$5.00 May Be Added to Fees
10.	OFFICERS AN	ID DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	EVP	☐ Delete	TITLE	Change Additi
NAME	AZZARELLI, SAMUEL J		NAME	
STREET ADDRESS CITY-ST-ZIP	161 BATH CLUB CR SAINT PETERSBURG, FL 337	706	STREET ADDRESS CITY-ST-ZIP	
TITLE	PD	Delete	TITLE	President Change Additi
NAME	AZZARELLI, BARTLE	<i>/</i> ·	NAME	John Messina
STREET ADDRESS	7810 RIVERSHORE DR		STREET ADDRESS	7816 River Shore Drive
CITY-ST-ZIP	TAMPA, FL		CITY - ST - ZIP	Tampa, FL 33604
TITLE	SD	Delete	TITLE	_ Li Change ! Additi
NAME	HINTON, LARRY A		NAME	Secretary
STREET ADDRESS City-ST-Zip	2473 POTTERS TURN KANKARR, IL		STREET ADDRESS CITY-S1-2IP	Pat Lynch
	ROMANN, IL			14 Marquette Lane Kankakee, IL 60901
TITLE NAME		Delete	TITLE NAME	Director Change Additi
STREET ADDRESS			STREET ADDRESS	Tom Martin
CITY-ST-ZIP			CITY-ST-ZIP	2364 Sun Set View Lane
IIITE		☐ Delete	TITLE	Kankakee, IL 60901
NAME			NAME	Director
STREET ADDRESS			STREET ADDRESS	Bret Azzarelli
CITY-ST-ZIP			CITY-\$1-ZIP	7808 River Shore Drive Tampa, FL 33
TITLE		☐ Delete	TITLE	Director Change Addition
NAME expect appeces			NAME	James Gerth
STREET AODRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	3097 Woodhaven Drive
		die fire de la march		Bourbonnais, IL 60914
12. I hereby of indicated of the corchanged	certify that the information supplied in this report or supplemental report poration of the receipt of trustee en or on an attachment with an address	in this filing does not qualify to true and accurate and that accurate and that accurate this report, with all other like empowered.	or the exemptions my signature shall it as required by Ci d.	contained in Chapter 119, Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am an officer or directo lapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11
SIGNAT	URE!		om Martin	198-07 815-937-8700
	signature and typed o	OR PRINTED NAME OF SIGNING OFFICE	R OR DIRECTOR	Director Date Daysme Phone #