


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2008 8:00 am**  
**Secretary of State**

04-14-2008 90061 001 \*\*\*\*61.25

<b>DOCUMENT # 714697</b> 1. Entity Name <b>ELEGANT EIGHT, INC.</b>					
Principal Place of Business 9801 E BAY HARBOR DR BAY HARBOR ISLANDS, FL 33154				Mailing Address 9801 E BAY HARBOR DR #4W BAY HARBOR ISLAND, FL 33154 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <b>9801 E Bay Harbor Dr</b> Suite, Apt. #, etc. <b>#2W</b>			
Suite, Apt. #, etc.		City & State <b>Bay Harbor Islands, FL</b>			
City & State		Zip <b>33154</b>		Country <b>US</b>	
4. FEI Number <b>59-1218219</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required			
6. Name and Address of Current Registered Agent  <b>BARTLETT, WILLIAM</b> <b>9801 E BAY HARBOR DR, #4W</b> <b>MIAMI, FL 33154</b>			7. Name and Address of New Registered Agent Name <b>Rick S. Snyder</b> Street Address (P.O. Box Number is Not Acceptable) <b>9801 East Bay Harbor Dr, #2W</b> City <b>Bay Harbor Islands</b> <b>FL</b> Zip Code <b>33154</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <b>Rick S. Snyder</b> <span style="float: right;">1-9-08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BARTLETT, WILLIAM 9801 E. BAY HARBOR DRIVE BAY HARBOR ISLS, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Rick S. Snyder 9801 E. Bay Harbor Dr #2W Bay Harbor Islands, FL 33154	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LARGEUER, BARBARA 9801 E BAY HARBOR DR BAY HARBOR ISLANDS, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MANSEN, ERIC 9801 EAST BAYHARBOR DRIVE MIAMI, FL 33154	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <b>Rick S. Snyder</b>			1-9-08 (305) 866-9798		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		