2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2008
Secretary of State

DOCUMENT# F06000006519

Entity Name: ELWYN, INC.

Current Principal Place of Business:

111 ELWYN RD.
ELWYN, PA 19063

New Principal Place of Business:

Current Mailing Address:

111 ELWYN RD.
ELWYN, PA 19063

New Mailing Address:

FEI Number: 23-1352117 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

CORPORATE SERVICES, INC.
777 SOUTH FLAGLER DR., SUITE 500 E.
W. PALM BCH, FL 33401 US

Name and Address of New Registered Agent:

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: CORNELIUS, SANDRA S
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

Title: DVC ( ) Delete
Name: LEAMAN, J. RICHARD JR.
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

Title: DVC ( ) Delete
Name: WECHSLER, ALAN
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

Title: DS ( ) Delete
Name: LINCKE, WILLIAM P
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

Title: DT ( ) Delete
Name: DIXON, WILLIAM J JR.
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

Title: D ( ) Delete
Name: BABIN, JOSEPH E
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PHD (X) Change ( ) Addition
Name: CORNELIUS, SANDRA S
Address: 111 ELWYN RD.
City-St-Zip: ELWYN, PA 19063

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WILLIAM P. LINCKE DS 08/09/2008

Electronic Signature of Signing Officer or Director — Date