

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001882

Entity Name: ELAYAWAY, INC.

FILED
Aug 02, 2011
Secretary of State

Current Principal Place of Business:

1625 SUMMIT LAKE DR
HILLSIDE BLDG SUITE 205
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

1625 SUMMIT LAKE DR
HILLSIDE BLDG SUITE 205
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 20-8235863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALIE, DOUGLAS
1625 SUMMIT LAKE DR
HILLSIDE BLDG SUITE 205
TALLAHASSEE, FL 32317 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: CP
Name: SALIE, DOUGLAS
Address: 1625 SUMMIT LAKE DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: CEO
Name: SALIE, DOUGLAS
Address: 1625 SUMMIT LAKE DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: VCP
Name: PINON, SERGIO
Address: 1625 SUMMIT LAKE DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: S
Name: PINON, SERGIO
Address: 1625 SUMMIT LAKE DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: DT
Name: HARMON, BRUCE
Address: 1625 SUMMIT LAKE DR
City-St-Zip: TALLAHASSEE, FL 32317

Title: CFO
Name: HARMON, BRUCE
Address: 1625 SUMMIT LAKE DR
City-St-Zip: TALLAHASSEE, FL 32317

I hereby 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 all other like empowered.

SIGNATURE: BRUCE HARMON

CFO

08/02/2011

Electronic Signature of Signing Officer or Director

Date