

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005014

FILED
Jan 06, 2004
Secretary of State

Entity Name: ELIZABETH MORELAND CONSULTING, INC.

Current Principal Place of Business:

125 MAY ST.
ORANGE CITY, FL 32763

New Principal Place of Business:

Current Mailing Address:

125 MAY ST.
ORANGE CITY, FL 32763

New Mailing Address:

FEI Number: 39-1842200

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELMAN, JAMES M
125 MAY STREET
ORANGE CITY, FL 32763

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: MORELAND, ELIZABETH
Address: 5758 FOX HOLLOW RD.
City-St-Zip: DELEON SPGS, FL 32130

Title: ST () Delete
Name: EKMAN, JIM
Address: 5758 FOX HOLLOW RD
City-St-Zip: DELEON SPGS, FL 32763

Title: V (X) Delete
Name: IVEY, SHARON
Address: 132 WOOD RIDGE TRAIL
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: MORELAND, ELIZABETH
Address: 515 SOFT SHADOW LANE
City-St-Zip: DEBARY, FL 32713

Title: ST (X) Change () Addition
Name: EKMAN, JIM
Address: 515 SOFT SHADOW LANE
City-St-Zip: DEBARY, FL 32713

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

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: JIM EKMAN

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01/06/2004

Electronic Signature of Signing Officer or Director

Date