

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001075

FILED
Apr 18, 2006
Secretary of State

Entity Name: ELLIOTT ENERGY SYSTEMS, INC.

Current Principal Place of Business:

2901 SE MONROE ST
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

2901 SE MONROE ST
STUART, FL 34997 US

New Mailing Address:

FEI Number: 25-1798393 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, KENNETH A
2400 SE FEDERAL HWY
4TH FLOOR
STUART, FL 34994 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: COX, WILLIAM
Address: 901 N 4TH ST
City-St-Zip: JEANNETTE, PA 15644

Title: CCEO () Delete
Name: USHITORA, AKIHIRO
Address: 350 SALOMON CIRCLE
City-St-Zip: SPARKS, NV 89434

Title: OH () Delete
Name: KELLY, DAVID
Address: 901 N. 4TH ST.
City-St-Zip: JEANNETTE, PA 15644

Title: PCOO () Delete
Name: DEWIS, DAVID
Address: 2901 SE MONROE STREET
City-St-Zip: STUART, FL 34997

Title: VP () Delete
Name: HILLMAN, STEPHEN
Address: 2901 SE MONROE STREET
City-St-Zip: STUART, FL 34997

Title: C () Delete
Name: BOWEN, THOMAS
Address: 2901 SE MONROE STREET
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS BOWEN

C

04/18/2006

Electronic Signature of Signing Officer or Director

Date