

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H28137

Entity Name: ESLU, INC.

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

120 INTERNATIONAL PKWY
SUITE 176
LAKE MARY, FL 32746

Current Mailing Address:

P.O. BOX 952679
LAKE MARY, FL 32795

New Principal Place of Business:

120 INTERNATIONAL PKWY
SUITE 220
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 59-2462702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, G. VINCENT
1808 WINGFIELD DRIVE
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

BUTLER, G. VINCENT
120 INTERNATIONAL PARKWAY
SUITE 220
LAKE MARY, FL 32746 US

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

04/26/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BUTLER, G.VINCENT
Address: 1808 WINGFIELD DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: SD () Delete
Name: LATOFF, ADRIENNE
Address: 10519 MARSH COVE COURT
City-St-Zip: ORLANDO, FL 32825

Title: PD () Delete
Name: JENNINGS, LYNN H.
Address: 1001 FERNE DR
City-St-Zip: LONGWOOD, FL 32750

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:

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: LYNN JENNINGS

Electronic Signature of Signing Officer or Director

PD

04/26/2007

Date