2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J03139

Entity Name: ELWILL SAVAGE, INC.

FILED Apr 24, 2007 Secretary of State

| Name and Address of Current Registered Agent: | | | Name and Address of New Registered Agent: | |
|---|----------|------------------|---|-----------------------------------|
| FEI Number: 58-1711292 | FEI Numb | er Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () |
| 319 MONROE DRIVE WEST PALM BEACH, FL | 33405 | US | | |
| Current Mailing Address: | | | New Mailing Address: | |
| 319 MONROE DRIVE WEST PALM BEACH, FL | 33405 | US | | |
| Current Principal Place of Business: | | | New Principal Place of Business: | |

MORA, ABRAHAM M 777 S FLAGLER DR WEST TOWER STE 900 WEST PALM BEACH, FL 33401 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 Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change () Addition SLATER, TIM SLATER, TIM Name: Name: 319 MONROE DRIVE 319 MONROE DRIVE Address: Address: City-St-Zip: WEST PALM BEACH, FL City-St-Zip: WEST PALM BEACH, FL 33405

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SLATER, TIM
 Name:
 SLATER, TIM

 Address:
 319 MOW ROE DR
 Address:
 319 MONROE DR

City-St-Zip: WEST PALM BEACH, FL 33403 City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: T () Delete Title: () Change () Addition

 Name:
 STUMP, MITCHELL
 Name:

 Address:
 26 PRINCEWOOD LANE
 Address:

 City-St-Zip:
 PALM BEACH, FL 33410
 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: TIM SLATER P 04/24/2007