FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J76165

(6)

ELLINGTON CONSULTING CO., INC.

Mailing Address

% ROBERT F. ELLINGTON 2912 BEAGLE PLACE SEFFNER FL 33584

Principal Place of Business

% ROBERT F. ELLINGTON 2912 BEAGLE PLACE SEFFNER FL 33584

FILED Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Suite, Apl. #, etc. Suite, Apl. #, etc.						06/01/1987				
Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Apt. #, etc. Suite. Suite.	2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Ap	plied For	
City & State	21					59-2806599		No.	t Applicable	
City & State City & State City & City & State City & State		#, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired	\$8	3.75 A	dditional	
22 22 23 25	22					J. Commodic of Change Desired		Fee Re	quired	
Zip Country Zip Country Zip Country 8. This corporation owes or has paid the current year intengible 9. Name and Address of Gurrent Registered Agent ELLINGTON, ROBERT F. 2912 BEAGLE PLACE SEFFNER FL 33584 81	City & State City & State					6. Election Campaign Financing	\$	5.00	Мау Ве	
28 25 30 30 30 30 30 30 30 3	23					Trust Fund Contribution	/	Added to	Fees	
S. Name and Address of Current Registered Agent ELLINGTON, ROBERT F. 2912 BEAGLE PLACE SEFFNER FI. 33584 82 Street Address (P.O. Box Number Is Not Acceptable) 83 Street Address (P.O. Box Number Is Not Acceptable) 84 City FL 85 Zip Code 11. Pusaut to the provisions of Sections 507 (592 and 607 1598, Parties Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Riorida. Such change was such agent, and accept the obligations of, Section 607 (595, Florida Statutes) 85 SIGNATURE 95 SIGNATURE 95 SIGNATURE 95 SIGNATURE 12. OFFICERS AND DIFECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. SIRRET ADDRESS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. SIRRET ADDRESS 2912 BEAGLE PLACE 2912 BEAGLE PLACE 30 SIRRET ADDRESS 2912 BEAGLE PLACE 30 SIRRET ADDRESS 31 SIRRET ADDRESS 3212 BEAGLE PLACE 32 SIRRET ADDRESS 33 SIRRET ADDRESS 34 CITY-ST-2P 11. TILL 12. SIRRET ADDRESS 33 SIRRET ADDRESS 34 CITY-ST-2P 11. TILL 12. SIRRET ADDRESS 33 SIRRET ADDRESS 34 CITY-ST-2P 11. SIRRET ADDRESS 33 SIRRET ADDRESS 34 CITY-ST-2P 11. SIRRET ADDRESS 34 CITY-ST-2P 11. SIRRET ADDRESS 35 SIRRET ADDRESS	—	— ·	⊢ '		1	8. This corporation owes or has p	aid the current y	year Inta	angible	
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ELLINGTON, PATRICIA A. 2912 BEAGLE PLACE SEFFNER FL 30584 30 30 40 41 42 42 43 44 44 45 45 45 45 45 45 45		g Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	egistered Agen	t		
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14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the information	STREET ADDRESS			6.3 STREET	ADDRESS					
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under only that	CITY-ST-ZIP			6.4 CITY - ST	r-ZIP					
	14. I hereby c	ertify that the information supplied won this annual report or supplementa	ith this filing does not qualify for	the exempt	ion stated in Se	ection 119.07(3)(i), Florida Statutes. I	further certify th	at the in	formation	

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 in Block 12 or Block 13 if changed, or on an attachment with an address.