

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K37924

Entity Name: ELFERS PROPERTIES, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

18704 MACH ONE DR.
PORT SAINT LUCIE, FL 34987 US

New Principal Place of Business:

Current Mailing Address:

18704 MACH ONE DR.
PORT SAINT LUCIE, FL 34987 US

New Mailing Address:

FEI Number: 65-0075614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELFERS, FREDRICK
18704 MACH ONE DR.
PORT SAINT LUCIE, FL 34987 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: DS () Delete
Name: HACKETT, CLARA ANNA,
Address: 18704 MACH ONE DR.
City-St-Zip: PORT SAINT LUCIE, FL 34987

Title: DPT () Delete
Name: ELFERS, FREDERICK
Address: 18704 MACH ONE DR.
City-St-Zip: PORT SAINT LUCIE, FL 34987

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DPT (X) Change () Addition
Name: ELFERS, FREDRICK
Address: 18704 MACH ONE DR.
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: FREDRICK ELFERS

DPT

04/25/2005

Electronic Signature of Signing Officer or Director

Date