2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

K95993 DOCUMENT

1. Entity Name

ELLIS FINANCIAL PLANNING, INC.



FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90470 002 ***150.00

					- CONTRACTOR	1				
Principal Place of Business 2750 STICKNEY POINT ROAD STE - 107 SARASOTA FL 34231 US		Mailing Address 2750 STICKNEY POINT RD STE - 107 SARASOTA FL 34231 US								
2. Principal Place of Business		3. Mailing Address] '		10106 (SL 01016 01	\$13 U\$QLI 9 1014 6	IUJI DIDIK IDBI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 65-0		Number 65-013774	19	<u> </u>	oplied For ot Applicable
Zip				Country		5. Certificate of Status Desired			\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				- 1 - 1 - 1		7. Nam	ne and Address of New	Registered /	Agent	
					Name					
ELLIS, GARY S					·					
		Street Address			(P.O. Box Number is Not Acceptable)					
2750 STICKNEY PO										
UNIT 107										
SARASOTA FL 3423				City			FL	Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.										
SICNATURE	d or printed name of registered agent a	and title if applic	cable. (NOTE:	: Registered A	ent signature required	when reinstat	ting)	DATE		<u> </u>
•										
	!!! FEE IS \$150.00	1				} .	9. Election Campaign	Financing	\$5.0	O May Be
Milei Way 1, 20	003 Fee will be \$550.00					ļ	Trust Fund Contribu			to Fees
Make Check Payable to Florida Department of State										
										
10.	OFFICERS AND	DIRECTOR	 _	11.		ADDITI	IONS/CHANGES TO O	FFICERS AND	DIRECTORS	
TITLE D	-,	DIRECTOR	Delete	TITLE		ADDITI	IONS/CHANGES TO O	FFICERS AND	DIRECTORS	S IN 11
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TITLE D ELLIS, GASTREET ADDRESS 2813 CO	ARY VENTRY DRIVE	DIRECTOR	 _	TITLE NAME STREET	ſ	ADDITI	IONS/CHANGES TO O	FFICERS AND		
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like into wered.

SIGNATURE: