

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027486

FILED
Mar 16, 2005
Secretary of State

Entity Name: ELITE CAPITAL MANAGEMENT GROUP LLC

Current Principal Place of Business:

611 S. FORT HARRISON SUITE 353
CLEARWATER, FL 33767

New Principal Place of Business:

611 S. FORT HARRISON SUITE 353
353
CLEARWATER, FL 33767

Current Mailing Address:

611 S. FORT HARRISON SUITE 353
CLEARWATER, FL 33767

New Mailing Address:

611 S. FORT HARRISON SUITE 353
353
CLEARWATER, FL 33767

FEI Number: 76-0743105

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIGUEROA, DAVID E
3013 REGAL OAKS BLVD
PALM HARBOR, FL 34684 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: LA BELLE, NEIL J
Address: 2940 SUGAR BEAR TRAIL
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR () Delete
Name: LA BELLE, EARL J
Address: 2940 SUGAR BEAR TRAIL
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LA BELLE, NEIL J
Address: 17654 KAREN STREET
City-St-Zip: OMAHA, NE 68135

Title: MGR (X) Change () Addition
Name: LA BELLE, EARL J
Address: 17654 KAREN STREET
City-St-Zip: OMAHA, NE 68135

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NEIL LA BELLE

MGR

03/16/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date