2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008
Secretary of State

DOCUMENT# L06000012452

Entity Name: ELS LLC

Current Principal Place of Business:

2935 VINELAND RD.
KISSIMMEE, FL 34746 US

New Principal Place of Business:

Current Mailing Address:

2935 VINELAND RD.
KISSIMMEE, FL 34746 US

New Mailing Address:

FEI Number: 20-4250656 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELLIOTT, MICHAEL T
2935 VINELAND RD.
KISSIMMEE, FL 34746 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/MANAGERS:

Title: MGRM ( ) Delete
Name: ELLIOTT, MICHAEL T
Address: 2935 VINELAND RD.
City-St-Zip: KISSIMMEE, FL 34746 US

Title: MGRM ( ) Delete
Name: LEIBOLD, WALTER F
Address: 4200 CHAIN FERN CT.
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: MGRM ( ) Delete
Name: SARLO, ANITA L
Address: 2935 VINELAND RD.
City-St-Zip: KISSIMMEE, FL 34746 US

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WALTER F. LEIBOLD MGRM 03/31/2008

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