2007 FOR PROFIT CORPORATION ____ ANNUAL REPORT

FILED Mar 12, 2007 08:00 A Secretary of State

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1. Entity Name ESI GROUP, INC.



Principal Place of Business C/O ROBERT S. TRINKLE 102 NORTH 20TH STREET

TAMPA, FL 33605

Mailing Address

C/O ROBERT S. TRINKLE 102 NORTH 20TH STREET TAMPA, FL 33605



DO NOT WRITE IN THIS SPACE

01082007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

59-2980245 Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REDMAN, JAMES L 212 NORTH COLLINS STREET SUITE 2 PLANT CITY, FL 33563-3314

SIGNATURE:

DO NOT WRITE IN THIS SPACE

 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. 											
SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating).											
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees							
10.	OFFICERS AND DIRECTORS										
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWINDLE, EDWARD ROUTE 2, BOX 532 DOVER, FL			U0000663253 03/21/07-80045-003 150.00							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWINDLE, MYRTLE LOU ROUTE 2, BOX 532 DOVER, FL				OUT CAT OF SOUTH STATE OF STAT						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWINDLE, RODNEY E 9471 MCINTOSH RD DOVER, FL		DO NOT WRITE								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SWINDLE, LAURENCE E 102 N. 20TH ST TAMPA, FL 33605			IN THIS SPACE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP											
TITLE NAME STREET ADDRESS CITY+ST-ZIP	-										
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 empowered.											