2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009744

Entity Name: EC LG. INC.

Address:

City-St-Zip:

200 W. FORSYTH STREET

JACKSONVILLE, FL 32202

FILED Apr 12, 2007 Secretary of State

Littly Na	ille. EC EG, II	NC.			
Current P	rincipal Place	e of Business:	New Principal Place of Business:		
	(LIN COURT S RSBURG, FL				
Current N	lailing Addres	ss:	New Mailing Address:		
PO BOX 4 SAINT PE	6785 TERSBURG, F	FL 33741			
FEI Number	: 47-0903766	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
COOPÉR, 136 EAST	EORGE E ESC , RIDGE & LAT BAY STREET IVILLE, FL 322	INBERG, P.A , SUITE 301			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
		nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MCKENNA, WI P.O. BOX 4678		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RANSON, ARTI	PLACE, STE 1700	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (WRENN, GRO 7319 DESERT BRADENTON,	RIDGE GLEN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MCKENNA, SH PO BOX 46785		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP (RIDGE, GEOR) Delete GE E ESQ	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: CHRISTOPHER P. BRENNAN CFO 04/12/2007