2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06273

Entity Name: ELLIS FOUNDATION, INC.

FILED Feb 07, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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34 W. ORANGE ST.

TARPON SPRINGS, FL 34689 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1879

TARPON SPRINGS, FL 34688 US

FEI Number: 59-2471638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HALL, DONALD R 28050 U.S. HWY.19 NORTH, SUITE 402 CLEARWATER, FL 33761 US

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:

Clashrania Giamahura of Danisharad Awart

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 GIBSON, STANLEY G JR.
 Name:
 GIBSON, STANLEY G JR.

 Address:
 3191 EDGEMOOR DRIVE
 Address:
 5012 WESLEY DRIVE

 City-St-Zip:
 PALM HARBOR, FL
 City-St-Zip:
 TAMPA, FL
 33647

Title: CD () Delete Title: CD (X) Change () Addition

 Name:
 MARTIN, CAROL E
 Name:
 MARTIN, CAROL E

 Address:
 518 RIVERSIDE DRIVE
 Address:
 P. O. BOX 1291

City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34688

Title: DST (X) Delete Title: () Change () Addition

 Name:
 HIMONETOS, MARY
 Name:

 Address:
 1017 WIDEVIEW AVE.
 Address:

 City-St-Zip:
 TARPON SPRINGS, FL 34689
 City-St-Zip:

Title: DV () Delete Title: DV (X) Change () Addition Name: THOMPSON, JOHN Name: THOMPSON, JOHN G

Address: 26 W ORANGE ST Address: 1221 E. TARPON AVENUE
City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Delete Title: ST () Change (X) Addition

Name: Name: RISTORCELLI, PETER
Address: Address: P. O. BOX 1879

City-St-Zip: City-St-Zip: TARPON SPRINGS, FL 34688

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 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.

SIGNATURE: CAROL E. MARTIN CD 02/07/2005