2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000969

Address:

City-St-Zip:

JACKSONVILLE, FL 32244

FILED Apr 15, 2009 Secretary of State

Entity Name: THE KREWE OF ELI, INC. **Current Principal Place of Business: New Principal Place of Business:** 8562 SHUTER CT JACKSONVILLE, FL 32220 **Current Mailing Address: New Mailing Address:** 8562 SHUTER CT JACKSONVILLE, FL 32220 FEI Number: 39-2070988 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: SCUOTTO, PATRICIA E 8562 SHUTER CT JACKSONVILLE, FL 32220 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SCUOTTO, PATRICIA E Name: Name: Address: 8562 SHUTER CT Address: City-St-Zip: JACKSONVILLE, FL 32220 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PEDROSA, MARIA Name: Address: 8129 PINE SPRINGS LN Address: City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: Title: () Delete Title: () Change () Addition SZALA, VICKIE Name: Name: 8345 PEPPERWOOD CT

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 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:

Ρ SIGNATURE: PATRICIA E SCUOTTO 04/15/2009