2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001832

Address:

City-St-Zip:

813 OAKWOOD DRIVE

MELBOURNE, FL 32940

FILED Jan 13, 2009 Secretary of State

Entity Na	me: ENOSIS,	INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	ERFRONT ST RNE, FL 32934	. US		
Current Mailing Address:			New Mailing Address:	
	ERFRONT ST RNE, FL 32934	US		
FEI Number:	: 59-3181322	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:	
THEOFANOUS, SOPHIA P 510 WATERFRONT ST MELBOURNE, FL 32934 US				
	named entity see of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,
SIGNATU				
	Electror	ic Signature of Registered Ag	ent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () THEOFANOUS, 510 WATERFR MELBOURNE,	ONT ST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	PHILIPS, CONS 925 HWY A1A,		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	DS () PAVLAKOS, MA	Delete ARY	Title: Name:	() Change () Addition

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:

SIGNATURE: SOPHIA P. THEOFANOUS DP 01/13/2009