

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007064

FILED
May 01, 2006
Secretary of State

Entity Name: ELHS CONSOLIDATED BOOSTERS, INC.

Current Principal Place of Business:

1300 SILVER EAGLE DRIVE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1633
OLDSMAR, FL 34677 US

New Mailing Address:

FEI Number: 59-3546958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCKEE, ROBERT A
2916 CYPRESS RIDGE DRIVE
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: HOUCK, BRENT
Address: 1300 SILVER EAGLE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: VPD () Delete
Name: LESNIAK, RICK
Address: 1300 SILVER EAGLE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: DS () Delete
Name: CARALLA, IRIS
Address: 1300 SILVER EAGLE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TRD () Delete
Name: MCKEE, ROBERT
Address: 1300 SILVER EAGLE DRIVE
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ROBERT MCKEE

TRD

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date