

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000056174

Entity Name: ELLDER, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

3101 GULFSTREAM RD.
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

3101 GULFSTREAM RD.
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 01-0636398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, CARIDAD
3101 GULFSTREAM RD.
LAKE WORTH, FL 33461 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELLIOTT, CURTIS L
Address: 606 LAKEVIEW DR
City-St-Zip: ROYAL PALM BCH, FL 33411

Title: VP () Delete
Name: BROWN, MAX A
Address: 281 TROPIC DRIVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: S () Delete
Name: SNYDER, GEORGE H
Address: 3101 GULF STREAM RD
City-St-Zip: LAKE WORTH, FL 33461

Title: T () Delete
Name: SNYDER, CARIDAD
Address: 3101 GULFSTREAM ROAD
City-St-Zip: LAKE WORTH, FL 33461

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARIDAD SNYDER

T

04/30/2006

Electronic Signature of Signing Officer or Director

Date