

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105705

FILED
Mar 29, 2009
Secretary of State

Entity Name: ELITE ASSOCIATION MANAGEMENT, INC.

Current Principal Place of Business:

112 SW MONROE CIR N
SAINT PETERSBURG, FL 33703 US

New Principal Place of Business:

Current Mailing Address:

112 SW MONROE CIR N
SUITE 8
SAINT PETERSBURG, FL 33703 US

New Mailing Address:

FEI Number: 59-3751941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, GERRIE
112 SW MONROE CIR N
SAINT PETERSBURG, FL 33703 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: FATA, GREGORY G
Address: 112 SW MONROE CIR N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: V () Delete
Name: MCBRIDE, THOMAS J
Address: 112 SW MONROE CIR N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: TD () Delete
Name: MCBRIDE, JUDY
Address: 109 THE CORSO
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: FATA, MIKEAL P
Address: 1705 LOCUST
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D (X) Delete
Name: GERALDINE, RAY
Address: 112 SW MONROE CIR N
City-St-Zip: SAINT PETERSBURG, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FATA, GREGORY G
Address: 112 SW MONROE CIR N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: VPD (X) Change () Addition
Name: MCBRIDE, THOMAS J
Address: 112 SW MONROE CIR N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: TD (X) Change () Addition
Name: FATA, GREGORY G
Address: 112 S.W. MONROE CIRCLE N.
City-St-Zip: ST. PETERSBURG, FL 33703

Title: SD (X) Change () Addition
Name: RAY, GERRIE
Address: 112 S.W. MONROE CIRCLE N.
City-St-Zip: SAINT PETERSBURG, FL 33703

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

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

SIGNATURE: GREGORY G. FATA

PD

03/29/2009

Electronic Signature of Signing Officer or Director

_____ Date