2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000105663

Entity Name: ELEVINWORKS, INC.

FILED Apr 25, 2004 Secretary of State

C/O JAMES S CAMPBELL
501 COMMENDENCIA STREET
501 COMMENDENCIA STREET
PENSACOLA, FL 32502

C/O JAMES S. CAMPBELL
501 COMMENDENCIA STREET
PENSACOLA, FL 32502

US

Current Mailing Address: New Mailing Address:

C/O JAMES S CAMPBELL
501 COMMENDENCIA STREET
501 COMMENDENCIA STREET
PENSACOLA, FL 32501

C/O JAMES S CAMPBELL
501 COMMENDENCIA STREET
PENSACOLA, FL 32502

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAMPBELL, JAMES S
501 COMMENDENCIA STREET
501 COMMENDENCIA STREET
PENSACOLA, FL 325025915 US
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 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: JAMES S. CAMPBELL 04/25/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 LEVIN, EVAN
 Name:

 Address:
 501 COMMENDENCIA STREET
 Address:

 City-St-Zip:
 PENSACOLA, FL 32502
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EVAN LEVIN D 04/25/2004