


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT


**FILED**  
**Sep 11, 2006 8:00 am**  
**Secretary of State**

09-11-2006 90006 008 \*\*\*150.00

<b>DOCUMENT # P04000043251</b>		
1. Entity Name ELYSIAN CO. INC.		

Principal Place of Business 4640 POMPAO ST PLACIDA, FL 33946	Mailing Address 4640 POMPAO ST PLACIDA, FL 33946
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2. Principal Place of Business 72 BOUNDARY BLVD Suite, Apt. #, etc. UNIT 222 City & State ROTONDA WEST FL Zip 33947 Country USA	3. Mailing Address 72 BOUNDARY BLVD Suite, Apt. #, etc. UNIT 222 City & State ROTONDA WEST FL Zip 33947 Country USA
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09052006 Chg-P	CR2E034 (11/05)
4. FEI Number 20-0859837	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MACLEOD, RANDY C BARCO'S ACCOUNTING 1861 PLACIDA RD STE 201 ENGLEWOOD, FL 34223	7. Name and Address of New Registered Agent Name JAMES YELLICO Street Address (P.O. Box Number is Not Acceptable) 72 BOUNDARY BLVD UNIT 222 City ROTONDA WEST FL Zip Code 33947
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Randy C Macleod* (NOTE: Registered Agent signature required when reinstating)

DATE: 9/5/06

<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD REILLY, ROBERT M 4640 POMPAO ST PLACIDA, FL 33946 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD YELLICO, JAMES A 72 BOUNDARY BLVD UNIT 222 ROTONDA W, FL 33947 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Randy C Macleod* 9/5/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 9/5/06 Daytime Phone #