

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092193

FILED
Apr 30, 2007
Secretary of State

Entity Name: ELATION CREATION PRODUCTIONS INC.

Current Principal Place of Business:

P.O. BOX 22544
LAKE BUENA VISTA, FL 32830

New Principal Place of Business:

215 HILLTOP ST.
DAVENPORT, FL 33837

Current Mailing Address:

P.O. BOX 22544
LAKE BUENA VISTA, FL 32830

New Mailing Address:

FEI Number: 84-1649799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNOWS, SAWNEY MR.
14540 GLOBAL CIRCLE #5307
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

SNOWS, SAWNEY MR.
215 HILLTOP ST.
DAVENPORT, FL 33837 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: _____

Electronic Signature of Registered Agent

04/30/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: SNOWS, SAWNEY MR.
Address: P.O. BOX 22544
City-St-Zip: LAKE BUENA VISTA, FL 32830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SAWNEY SNOWS

PST

04/30/2007

Electronic Signature of Signing Officer or Director

Date