

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158347

Entity Name: ELITE GROUP REALTY, INC.

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

14001 63RD WAY N.
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

14001 63RD WAY N.
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 11-3764041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MELISA S
4415 W. IDLEWILD AVE.
TAMPA, FL 33614 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: JONES, MELISA S
Address: 4415 W. IDLEWILD AVE.
City-St-Zip: TAMPA, FL 33614

Title: VP () Delete
Name: FABRIZI, RICHARD J JR
Address: 5263 61ST AVE. S
City-St-Zip: ST. PETERSBURG, FL 33715

Title: S (X) Delete
Name: MARCIANO, STEVEN
Address: 3225 LATANA DR.
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: AMICO, ANTHONY N
Address: 9001 W. GULF BLVD.
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: JONES, MELISA S
Address: 4415 W. IDLEWILD AVE.
City-St-Zip: TAMPA, FL 33614

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 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: MELISA S JONES

P,S

04/22/2008

Electronic Signature of Signing Officer or Director

Date