

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000038679

Entity Name: ELLIOTT VENTURES, INC.

FILED  
May 20, 2008  
Secretary of State

## Current Principal Place of Business:

7369 WESCOTT TERRACE  
LAKE WORTH, FL 33467

## New Principal Place of Business:

## Current Mailing Address:

7369 WESCOTT TERRACE  
LAKE WORTH, FL 33467

## New Mailing Address:

FEI Number: 20-4554080

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELLIOTT, CHARINE G  
7369 WESCOTT TERRACE  
LAKE WORTH, FL 33467 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: CHARINE G. ELLIOTT

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ELLIOTT, EARL D  
Address: 7369 WESCOTT TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: VPD ( ) Delete  
Name: ELLIOTT, DENNIS R  
Address: 5283 FOX TRACE  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: SD ( ) Delete  
Name: ELLIOTT, CHARINE G  
Address: 7369 WESCOTT TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: TD ( ) Delete  
Name: ELLIOTT, SHARROL A  
Address: 8073 ABERDEEN DRIVE, #202A  
City-St-Zip: BOYNTON BEACH, FL 33437

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SVP (X) Change ( ) Addition  
Name: ELLIOTT, SHARROL A  
Address: 7369 WESCOTT TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: VPD (X) Change ( ) Addition  
Name: ELLIOTT, CHARINE G  
Address: 7369 WESCOTT TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: T (X) Change ( ) Addition  
Name: MATTIS, JULIA D  
Address: 7668 THORNLEE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

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: CHARINE G. ELLIOTT

Electronic Signature of Signing Officer or Director

DVP

05/20/2008

Date