

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000078092

FILED  
Apr 11, 2009  
Secretary of State

Entity Name: ENLESS, INC.

## Current Principal Place of Business:

38541 US HWY 19 N  
PALM HARBOR, FL 34684 US

## New Principal Place of Business:

## Current Mailing Address:

20 READ ST.  
TARPON SPRINGS, 34689

## New Mailing Address:

20 READ ST.  
TARPON SPRINGS, FL 34689

FEI Number: 26-3228890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAURSEN, NANCEE S  
20 READ ST.  
TARPON SPRINGS, FL 34689 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: SLATTERY, EDWARD J III  
Address: 522 GERSHWIN DR.  
City-St-Zip: LARGO, FL 33771 US

Title: VP, ( ) Delete  
Name: LAURSEN, NANCEE S  
Address: 20 READ ST  
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: T ( ) Delete  
Name: SLATTERY, EDWARD J III  
Address: 522 GERSHWIN DR.  
City-St-Zip: LARGO, FL US

Title: S ( ) Delete  
Name: LAURSEN, NANCEE S  
Address: 20 READ ST  
City-St-Zip: TARPON SPRINGS, FL 34689 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PAUL DEL MONTE

ACCT

04/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date