

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099442

Entity Name: ECOLIVEGREEN CORP.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

5100 WEST COPANS ROAD
810
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

5100 WEST COPANS ROAD
810
MARGATE, FL 33063

New Mailing Address:

FEI Number: 26-3941151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ADELSTEIN, STEVEN
7076 SPYGLASS AVE.
PARKLAND, FL 33076 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,D () Delete
Name: CULLER, PAUL L
Address: 346 FAIRWAY NORTH
City-St-Zip: TESQUESTA, FL 33469

Title: VP,D () Delete
Name: BRYAN, LEN
Address: 5100 W. COPANS ROAD SUITE 810
City-St-Zip: MARGATE, FL 33063

Title: VP,D () Delete
Name: ALBERT, TRACEY
Address: 5100 W. COPANS ROAD SUITE 810
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP,D (X) Change () Addition
Name: CULLER, PAUL L
Address: 346 FAIRWAY NORTH
City-St-Zip: TEQUESTA, FL 33469

Title: P,D (X) Change () Addition
Name: BRYAN, LEN
Address: 5730 GOLDEN EAGLE CIRCLE
City-St-Zip: PALM BEACH GARDEN, FL 33418

Title: VP,D (X) Change () Addition
Name: ALFRED, TRACY H III
Address: 16178 ROSECROFT TERRACE
City-St-Zip: LADY LAKE, FL 32162

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: STEVEN ADELSTEIN

Electronic Signature of Signing Officer or Director

R.A.

04/16/2009

Date