

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P94000083837

1. Entity Name

ELLUL ENTERPRISES, INC.



Principal Place of Business

1901 BRINSON RD  
S-3  
LUTZ, FL 33558

Mailing Address

P.O. BOX 2118  
LUTZ, FL 33548



02232006 No Chg-P CR2E034 (11/05)

4. FEI Number

38-2837903

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fees Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

ELLUL, JOSEPH A JR  
1901 BRINSON RD  
S-3  
LUTZ, FL 33558

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when consisting)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

DATE  
03/09/06-80028-016 150.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ELLUL, JOSEPH A JR  
1901 BRINSON RD S-3  
LUTZ, FL 33558

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ELLUL, BONNIE R  
1901 BRINSON RD S-3  
LUTZ, FL 33558

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Joseph A. Ellul Jr.* President  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/06  
Date

813-949-2953  
Daytime Phone #