2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000040955

Entity Name: E.L.M. DEVELOPERS, INC.

FILED Jun 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

528 CORBIN PARK ROAD 176 CORBIN PARK ROAD

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address: New Mailing Address:

528 CORBIN PARK ROAD 176 CORBIN PARK ROAD

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 US

FEI Number: 65-0763399 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MASSELL, ED MASSEL, ED

528 CORBÍN PARK ROAD 176 CORBÍN PARK ROAD

NEW SMYRNA BEACH, FL 32168 US NEW SMYRNA BEACH, FL 32168 US

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: ED MASSEL 06/20/2005

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 ().

AFFIGERS AND DIDECTORS

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 MASSELL, ED
 Name:
 MASSEL, ED

 Address:
 528 CORBIN PARK ROAD
 Address:
 176 CORBIN PARK ROAD

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168
 City-St-Zip:
 NEW SMYRNA BEACH, FL 32168

Title: VP () Delete Title: VP (X) Change () Addition

Name:MASSEL-KAISER, LAURAName:MASSEL-KAISER, LAURAAddress:528 CORBIN PARK ROADAddress:176 CORBIN PARK ROADCity-St-Zip:NEW SMYRNA BEACH, FL 32168City-St-Zip:NEW SMYRNA BEACH, FL 32168

Title: V () Delete Title: S (X) Change () Addition

Name:MASSEL, JEANNE MName:MASSEL, JEANNE MAddress:528 CORBIN PARK ROADAddress:176 CORBIN PARK ROADCity-St-Zip:NEW SMYRNA BEACH, FL 32168City-St-Zip:NEW SMYRNA BEACH, FL 32168

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAURA MASSEL-KAISER VP 06/20/2005