2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2008 08:00 Al Secretary of State

	AITHUAL ILLI VILI	
DOCUMENT	# P98000008085	
1. Entity Name		



Principal Place of Business

SIGNATURE

1700 PALM BEACH BLVD

SUITE 1000 WEST PALM BEACH, FL 33401

ELITE PUBLICATIONS, INC.

Mailing Address

1700 PALM BEACH BLVD

SUITE 1000

WEST PALM BEACH, FL 33401



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and the second of the second o	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5. Certificate of	Status Desired		. 75 Additional Required
6. Name and Address of Current Registered Agent			Kini K	alched of date	
SPILLIAS, KENNETH G 1700 PALM BEACH BLVD. STE. 1000 WEST PALM BEACH, FL 33401	1	DO N IN TI	* 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/RITE	
		The second of	3 (k)		i d
The above named entity submits this statement for the purpose of changing its register the obligations of registered agent.	ed office or register	ed agent, or both,	in the State of F	lorida. I am fami	iar with, and acce

(NOTE: Registered Agent signature required when reinstating)

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

Election Campaign Financing
 Trust Fund Contribution

\$5.00 May Be Added to Fees

	ay 1, 2008 Fee will be \$550.00	Trust Fund Contribution.
10.	OFFICERS AND DIREC	CTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAUGHON-PELL, GWENDOLYN 1700 PALM BEACH BLVD SUITE 100 WEST PALM BEACH, FL 33401	0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS HENDERSON, ELLEN 1700 PALM BEACH BLVD SUITE 100 WEST PALM BEACH, FL 33401	0 ·
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- 1000000878776; 04/14/08-80069-012 150.00

DATE

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:

GRATURY AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gwendolyn Pell 4/1

08 800-731-2889

Daytime Phone #