

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000031706

FILED
Apr 29, 2009
Secretary of State

Entity Name: ELITE INVESTIGATIVE SERVICES, INC.

Current Principal Place of Business:

P.O. BOX 260999
TAMPA, FL 336850999

New Principal Place of Business:

7612 WINGING WAY DRIVE
TAMPA, FL 33615

Current Mailing Address:

P.O. BOX 260999
TAMPA, FL 336850999

New Mailing Address:

P. O. BOX 2168
FAIRPLAY, CO 80440

FEI Number: 59-3504650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GERARDO, ANTHONY J III
7612 WINGING WAY DRIVE
TAMPA, FL 33615 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: PSTD () Delete
Name: GERARDO, ANTHONY III
Address: P.O. BOX 260999
City-St-Zip: TAMPA, FL 336850999

Title: VPD () Delete
Name: GERARDO, EUGENIE A
Address: P.O. BOX 260999
City-St-Zip: TAMPA, FL 336850999

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANTHONY GERARDO III

PSTD

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date