

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000098739

Entity Name: ELKWOOD PROPERTY CO.

**FILED**  
**May 31, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1803 AUSTRALIAN AVE. S, SUITE A  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 7225  
WEST PALM BEACH, FL 33405

**New Mailing Address:**

FEI Number: 65-0883438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROGERS, S EMORY  
1803 AUSTRALIAN AVE. S. SUITE A  
WEST PALM BEACH, FL 33409 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROGERS, S EMORY  
Address: P O BOX 7225  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: VSTD  
Name: ROGERS, LISA Y  
Address: P O BOX 7225  
City-St-Zip: WEST PALM BEACH, FL 33405

I hereby 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 all other like empowered.

SIGNATURE: S. E. ROGERS

PRES

05/31/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date