

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000074477

FILED
Feb 21, 2009
Secretary of State

Entity Name: ELANGY ASSOCIATES, INC.

Current Principal Place of Business:

3306 SW 15TH AVE
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

1616-102 CAPE CORAL PKWY
PMB #242
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 65-0957331 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITHERLAND, SANDRA
178 CHISHOLM TRL
FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

LITHERLAND, SANDRA
7092 NANTUCKET CIRCLE
NORTH FORT MYERS, FL 33917 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: _____ 02/21/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRECO, LISA
Address: 3306 SW 15TH AVE
City-St-Zip: CAPE CORAL, FL 33914

Title: D () Delete
Name: LITHERLAND, SANDRA
Address: 7092 NANTUCKET CIR #H-5
City-St-Zip: FORT MYERS, FL 33917

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: LISA GRECO PRES 02/21/2009
Electronic Signature of Signing Officer or Director Date