

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S98291

FILED  
Jul 01, 2004  
Secretary of State

Entity Name: ELITE INFORMATION SERVICES, INC.

## Current Principal Place of Business:

2021 ART MUSEUM DR  
SUITE 110  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

## Current Mailing Address:

2021 ART MUSEUM DR  
SUITE 110  
JACKSONVILLE, FL 32207

## New Mailing Address:

FEI Number: 59-3096881

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMAS, FRED  
2021 ART MUSEUM DR  
STE 110  
JACKSONVILLE, FL 32207 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: THOMAS, FRED,  
Address: 2256 INWOOD CR. SOUTH  
City-St-Zip: JACKSONVILLE, FL

Title: VST ( ) Delete  
Name: CLARK-GREEN, CHERYL, A  
Address: 716 OAKS PLANTATION DR  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: CLARK-GREEN, CHERYL, A  
Address: 716 OAKS PLANTATION DR  
City-St-Zip: JACKSONVILLE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: THOMAS, FRED,  
Address: 3822 SARAH BROOKE COURT  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VST (X) Change ( ) Addition  
Name: CLARK-GREEN, CHERYL, A  
Address: 716 OAKS PLANTATION DR  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D (X) Change ( ) Addition  
Name: CLARK-GREEN, CHERYL, A  
Address: 716 OAKS PLANTATION DR  
City-St-Zip: JACKSONVILLE, FL 32211

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: FRED THOMAS

PD

07/01/2004

Electronic Signature of Signing Officer or Director

Date