

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000005510

**Entity Name:** ELEVATE STUDIOS, INC.

**Current Principal Place of Business:**

700 SOUTH AVE  
EUSTIS, FL 32726

**Current Mailing Address:**

PO BOX 3009  
EUSTIS, FL 32727

**FEI Number:** 45-5246542

**Certificate of Status Desired:** No

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

RADSON, JASON M  
600 JENNINGS AVENUE  
EUSTIS, FL 32726 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name RITCHIE, AL  
Address PO BOX 3009  
City-State-Zip: EUSTIS FL 32727

Title V  
Name RITCHIE, CHERYL  
Address PO BOX 3009  
City-State-Zip: EUSTIS FL 32727

Title D  
Name LYNN, RAYFORD DAVE  
Address P.O. BOX 1111  
City-State-Zip: NEW SMYRNA BEACH FL 32170

Title ST  
Name HUGHES, LORI  
Address P.O. BOX 3009  
City-State-Zip: EUSTIS FL 32727

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHERYL RITCHIE

V

03/18/2015

Electronic Signature of Signing Officer/Director Detail

Date