

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 332170

FILED  
Mar 10, 2004  
Secretary of State

Entity Name: EDWARDS MACY-BRENNER'S, INC.

**Current Principal Place of Business:**

415 EAST PRINCETON ST.  
ORLANDO, FL 32803

**New Principal Place of Business:**

**Current Mailing Address:**

415 EAST PRINCETON ST.  
ORLANDO, FL 32803

**New Mailing Address:**

FEI Number: 59-1305605      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MOSS, LINDA M  
415 E. PRINCETON STREET  
ORLANDO, FL 32803    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: P ( ) Delete  
Name: BRENNER, GOLDY  
Address: 415 E PRINCETON ST  
City-St-Zip: ORLANDO, FL

Title: V ( ) Delete  
Name: BRENNER, EDWARD  
Address: 415 E. PRINCETON  
City-St-Zip: ORLANDO, FL

Title: P ( ) Delete  
Name: BRENNER, GOLDY  
Address: 415 E PRINCETON ST  
City-St-Zip: ORLANDO, FL 32803

Title: VP ( ) Delete  
Name: BRENNER, EDWARD  
Address: 415 E. PRINCETON  
City-St-Zip: ORLANDO, FL

Title: VP ( ) Delete  
Name: BRENNER, MARC  
Address: 415 E PRINCETON ST  
City-St-Zip: ORLANDO, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: M. BRENNER

VP

03/10/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date