

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 332170

FILED
Apr 20, 2003
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

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

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:

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

04/20/2003

Electronic Signature of Signing Officer or Director

_____ Date