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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 596169 1. Corporation Name

EDWARDS CONSTRUCTION SERVICES, INC.

Principal Place	of Rusiness	Mailing Address		# { \$00 \$0 \$ \$110 \$100 \$150 \$150 \$150 \$150	Olf Affit Bibit Biëtt biett biett stott som
Filliopal Flace of Business		85 S. W. 52ND AVENUE			
85 S. W. 52ND AVENUE OCALA FL 34474		OCALA FL 34474		DO NOT WRITE	IN THIS SPACE
US		U\$		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
				01/01/1979	
		1 A 14 W Add		4. FEI Number	Applied For
2. Principal Pla	ce of Business	2a. Mailing Address		59-1886910	Not Applicable
		Suite, Apt. #, etc.			\$8.75 Additional
Suite, Apt. #, etc.		27		5. Certifcate of Status Desired [Fee Required
City & Ctata		City & State		6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current	year Intangible
¬ '	25	 	30	Personal Property Tax.	
<u> </u>	9. Name and Address of Curre			10. Name and Address of New Reg	istered Agent
			81 Name		
EDW/	ARDS, STEVEN M		82 Street Ad	dress (P.O. Box Number is Not Acceptable	9)
85 S.W. 52ND AVENUE		•	OZ Silber Ab	41030 (1.10. DOX.110.1100 1.10.110.110.110.110.110.110.1	15
	LA FL 34474		83		
			94 Cit.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip Code
			84 City	rporation submits this statement for the pu	FL T
	gistorod agont, or both, in the				
*** office or re	n familiar with, and accept the oblig	ations of, Section 607.0303, Fio		ired when reinstating) , f = 17 / 5	DATE
SIGNATURE	n familiar with, and accept the oblig	ent and title if applicable. (NOTE		ired when reinstating) . / : : : : : : : : : : : : : : : : : :	CERS AND DIRECTORS IN 12
A agent. I an SIGNATURE 12.	n familiar with, and accept the oblig	ations of, Section 607.0303, Fio	: Registered Agent signature requ	aired when reinstating). (1973) ADDITIONS/CHANGES TO OFFICE	_
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AND SIGNATURE 12. TITLE NAME	on familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A T EDWARD,GEORGE D	ent and title if applicable. (NOTE ND DIRECTORS	Registered Agent signature required 13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
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SIGNATURE:

Steven M. Edwards

FILED

Feb 16, 1999 8:00 am Secretary of State

02-16-1999 90031 037 ***150.00