

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 5-29-96

B- 6632 C

DOCUMENT # 690528

(5)

1. Corporation Name

EDWARDS ENERGY SYSTEMS, INC.



Principal Place of Business

5400 DOWNING ST
DOVER FL 33527

Mailing Address

5400 DOWNING ST
DOVER FL 33527

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/16/1981

3a. Date of Last Report

06/02/1995

4. FEI Number

59-2106508

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

EDWARDS, DEAN
5400 DOWNING ST
DOVER FL 33527

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent or that of applicable

11b. Registered Agent Signature (Required after 6/30/95)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PDT	☐ DELETE
NAME	EDWARDS, DEAN	
STREET ADDRESS	5400 DOWNING ST	
CITY-ST-ZIP	DOVER FL	
TITLE	S	☒ DELETE
NAME	EDWARDS, WYMONA	
STREET ADDRESS	5400 DOWNING ST	
CITY-ST-ZIP	DOVER FL	
TITLE	V	☒ DELETE
NAME	EDWARDS, DON	
STREET ADDRESS	12200 RIDGE ROAD	
CITY-ST-ZIP	LARGO FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☒ Change ☐ Addition
6. NAME	SECRETARY
7. STREET ADDRESS	EDWARDS, DEAN
8. CITY-ST-ZIP	5400 DOWNING ST
9. TITLE	☒ Change ☐ Addition
10. NAME	DOVER, FL 33527
11. STREET ADDRESS	VICE PRESIDENT
12. CITY-ST-ZIP	EDWARDS, DEAN
13. TITLE	☐ Change ☐ Addition
14. NAME	5400 DOWNING ST
15. STREET ADDRESS	DOVER FL 33527
16. CITY-ST-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	
25. TITLE	☐ Change ☐ Addition
26. NAME	
27. STREET ADDRESS	
28. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dean Edwards, President DEAN EDWARDS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/22/96

816 659 1007

Telephone Number

CR2E034 (12/95)