



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 10, 2006 08:00 AM
Secretary of State

DOCUMENT # F97000003922			
1. Entity Name EDENS & AVANT REALTY, INC.			
Principal Place of Business 1901 MAIN ST STE 900 COLUMBIA, SC 29201		Mailing Address 1901 MAIN ST STE 900 COLUMBIA, SC 29201	
DO NOT WRITE IN THIS SPACE			
		01192006 No Chg-P CR2E034 (11/05)	
4. FEI Number 58-2327871		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SO PINE ISLAND RD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		02/21/06-80067-001 150.00	
TITLE	CEO	DO NOT WRITE IN THIS SPACE	
NAME	BROWN, TERRY		
STREET ADDRESS	Y		
CITY-ST-ZIP	COLUMBIA, SC 29201		
TITLE	VS		
NAME	MCLEAN, JODIE		
STREET ADDRESS	1901 MAIN ST STE 900		
CITY-ST-ZIP	COLUMBIA, SC 29201		
TITLE	C		
NAME	EDENS, JOE		
STREET ADDRESS	1901 MAIN ST STE 900		
CITY-ST-ZIP	COLUMBIA, SC 29201		
TITLE	D		
NAME	FRYER, WILLIAM B		
STREET ADDRESS	191 PEACHTREE ST		
CITY-ST-ZIP	ATLANTA, GA 303031763		
TITLE	D		
NAME	LOVE, J R		
STREET ADDRESS	7000 CENTRAL PARKWAY STE 1500		
CITY-ST-ZIP	ATLANTA, GA 30328		
TITLE	D		
NAME	PHERIGO, WILLIAM L		
STREET ADDRESS	1241 MAIN ST		
CITY-ST-ZIP	COLUMBIA, SC 29201		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 2/1/06 Daytime Phone # 803-779-4420	

Jason K. Tompkins, Chief Financial Officer