FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

AMENDED

DOCUMENT # P96000083351

1. Entity Name
EDISON BANCSHARES, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 SEP -3 PM 4:01

DO NOT WRITE IN THIS SPACE

500007675205--9
-09/12/02--01008--013
*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
13000 S. Cleveland Ave	P.O. Box 61399
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Fort Myers, FL 33907	City & State: Fort Myers, FL 33906
Zip / Country	Zip / Country

4. FEI Number: 65-0705508 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Geoffrey W. Roepstorff
Street Address (P.O. Box Number Is Not Acceptable): 13000 S. Cleveland Avenue
City: Fort Myers FL Zip Code: 33907

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.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CD
NAME	Sheridan, Howard Dr.
STREET ADDRESS	842 Cal Cove Drive
CITY-ST-ZIP	Fort Myers, FL 33919
TITLE	D
NAME	Case, Thomas D. Jr.
STREET ADDRESS	13451 McGregor Blvd., Ste. 29
CITY-ST-ZIP	Fort Myers, FL 33919
TITLE	D
NAME	Dosoretz, Daniel E. Dr.
STREET ADDRESS	13221 Ponderosa Lane
CITY-ST-ZIP	Fort Myers, FL 33901
TITLE	VCD
NAME	DuVall, David M.
STREET ADDRESS	1436 Brandywine Circle
CITY-ST-ZIP	Fort Myers, FL 33919
TITLE	PD
NAME	Roepstorff, Geoffrey W.
STREET ADDRESS	1287 Isabel Drive
CITY-ST-ZIP	Sanibel, FL 33957
TITLE	STD
NAME	Roepstorff, Robbie B.
STREET ADDRESS	1287 Isabel Drive
CITY-ST-ZIP	Sanibel, FL 33957

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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: David M. DuVall 8/22/02 239-466-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

9/6/02