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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K39973** (8)

1. Corporation Name

SOUTH EDGEWATER CORP.

Principal Place of Business

Mailing Address

**C/O FRANK A. BUSKIRK
3651 CORTEZ RD W. STE 300
BRADENTON FL 34210
US**

**C/O FRANK A. BUSKIRK
3651 CORTEZ RD W. STE 300
BRADENTON FL 34210
US**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

**BUSKIRK, FRANK A.
3651 CORTEZ RD W
STE 300
BRADENTON FL 34210**

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 607.1503, Florida Statutes, the above named corporation makes the 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, hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of Section 607.0503, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required)

Date of Signature (Required)

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PTD	BUSKIRK, FRANK A.	3651 CORTEZ RD W, STE 300	BRADENTON FL
V	BUSKIRK, EMILY B.	3651 CORTEZ RD W, STE 300	BRADENTON FL
S	DAWBORNE, EDNA M.	3651 CORTEZ RD W, STE 300	BRADENTON FL
AS	BUSKIRK, FRANK A.	3651 CORTEZ RD W, STE 300	BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-STATE-ZIP	5. CHANGE	6. ADDITION
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				☐	☐
				☐	☐
				☐	☐
				☐	☐

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 190.04(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and correct 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 conduct the 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 a letter.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-96

(941) 753-1616

CR2E034 (12/95)