

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000041764</b>		
1. Entity Name EDWARDS FINANCIAL SERVICES INC.		
Principal Place of Business 5534 LAKE HOWELL RD WINTER PARK, FL 32792		Mailing Address 5534 LAKE HOWELL RD WINTER PARK, FL 32792
<b>DO NOT WRITE IN THIS SPACE</b>		
01162004 No Chg-P CR2E034 (10/03)		
4. FEI Number 01-0677754		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent		
EDWARDS, JASON 5534 LAKE HOWELL RD WINTER PARK, FL 32792		<b>DO NOT WRITE IN THIS SPACE</b>
7. 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 _____ (NOTE: Registered Agent signature required when nominating) DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D EDWARDS, JASON 5534 LAKE HOWELL RD WINTER PARK, FL 32792	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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<b>DO NOT WRITE IN THIS SPACE</b>		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		