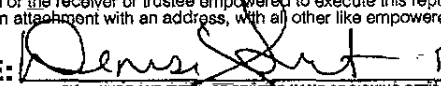


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 08, 2005 08:00 AM
Secretary of State**

DOCUMENT # P02000038432		
1. Entity Name ELECTRONIC DATA DISCOVERY, INC.		
Principal Place of Business 1400 VILLAGE SQ. BLVD. #3-254 TALLAHASSEE, FL 32312	Mailing Address 1400 VILLAGE SQ. BLVD. #3-254 TALLAHASSEE, FL 32312	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent THORNTON, GLEND L ESQ. 106 E. COLLEGE AVE. SUITE 900 TALLAHASSEE, FL 32301		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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MELENDEZ SMITH, DENISE 1400 VILLAGE SQ. BLVD. #3-254 TALLAHASSEE, FL 32301	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  Denise Melendez Smith		Date 3/7/15 Daytime Phone # 850.386.6004



03072005 No Chg-P CR2E034 (10/03)

4. FEI Number 46-0494424	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

U00000255498
03/08/05-80016-019 150.00