

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 179418

FILED
Sep 22, 2009
Secretary of State

Entity Name: EDWARDS DISCOUNT CITY CORPORATION

Current Principal Place of Business:

722 S MAIN ST
P.O. DRAWER 172
GAINESVILLE, FL 32602 US

New Principal Place of Business:

Current Mailing Address:

722 S MAIN ST
P.O. DRAWER 172
GAINESVILLE, FL 32601 US

New Mailing Address:

FEI Number: 59-0715299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, F.P.
722 S MAIN ST
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUTLER, FARLEY P
Address: 4100 SW 15 ST
City-St-Zip: GAINESVILLE, FL 32601

Title: VD () Delete
Name: BUTLER, F P
Address: 722 SOUTH MAIN STREET
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: F P BUTLER

PRES

09/22/2009

Electronic Signature of Signing Officer or Director

Date