## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 215489

(6)

## FILED Mar 02 1998 8:00am Secretary of State

EDWARDS AND EDWARDS, INC.			b (BELIA HING) (ARN) BILLI DIGAL (BILA DOLLARIO I	1841 B1841 B1841 B1841 B1841 A1841
Principal Place of Business	Mailing Address		- j godine siter dired divid dired ledie sell dirik e	1811 01611 01611 81011 01011 1051
MARVIN R EDWARDS	MARVIN R EDWARDS		•	
1345 RIVERBIRCH LN 1345 RIVERBIRCH LN JACKSONVILLE FL 32207-7540 JACKSONVILLE FL 32207-		7640	DO NOT WRITE IN THI	S SDACE
US	JACKSONVILLE FL 32207- US	7340	3. Date Incorporated or Qualified	3 3FACE
			09/15/1958	
2, Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-0913773	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State	City & State			Fee Required
23	28		6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip   Country	Zip	Country	8. This corporation owes or has paid the c	
2425		30	Personal Property Tax due June 30.	Yes No
g, Name and Address of Current			10. Name and Address of New Registere	d Agent
EDWARDS, MARVIN R		81 Name		
1345 RIVERBIRCH LN	_	82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
JACKSONVILLE FL 32207 - 754	0	[		
ተ		83		
		84 City	<b>F</b>	85 Zip Code
11 Pursuant to the provisions of Sections 607 0502	and 607 1508. Florida Statute	the above-named corno	oration submits this statement for the number	
11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligate	f Florida. Such change was au	thorized by the corporation	ion's board of directors. I hereby accept the ap	opointment as registered
	ions of, section 607.0505, Flor	ida Statutes.		
SIGNATURE Signature, typod or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature require	ed when reinstating) DATE	
12. OFFICERS AND	·	13.	ADDITIONS/CHANGES TO OFFICERS A	
NAME EDWARDS, MARVIN R	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
1045 DOSCODIDOU LAND		1.2 NAME		
IACKGONNALI E EI		1.3 STREET ADDRESS		
TITLE SD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME EDWARDS, HELENE S		2.2 NAME		
STREET ADDRESS 1345 RIVERBIRCH LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP JACKSONVILLE FL		2.4 CITY-ST-ZIP		
TITLE <b>D</b>	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME EDWARDS, MARVIN R.		3.2 NAME		
STREET ADDRESS 1345 RIVERBIRCH LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP JACKSONVILLE FL		3.4. CITY - ST - ZIP		··
NAME GUREVICH, NORMAN MARC	☐ DELETE	4.1 TOTLE	LEW STREET ADDRESS	Change Addition
4044 DEVEDE DONE			205 STRATHMORE AVE	184
CHIVED COOKS LIP-			ensington, MD 20895-1	119
CITY-ST-ZIP SILVETT SPRING WILL TITLE	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME	<b>_</b>	5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
		0.2 MAME		ł
\$TREET ADDRESS		6.3 STREET ADDRESS		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or open attachment with an address.

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