

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 361880

Entity Name: EDGEWOOD FARMS, INC.

FILED  
Jun 26, 2007  
Secretary of State

## Current Principal Place of Business:

RT 4 BOX 1463  
MADISON, FL 32340 US

## New Principal Place of Business:

277 NW LITTLE CAT ROAD  
MADISON, FL 32340 US

## Current Mailing Address:

PO BOX 276  
MADISON, FL 32340 US

## New Mailing Address:

FEI Number: 59-1173535      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, MICHAELENA  
RT 4 BOX 1463  
MADISON, FL 32340 US

## Name and Address of New Registered Agent:

WILSON, MICHAELENA  
277 NW LITTLE CAT ROAD  
MADISON, FL 32340 US

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

06/26/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILSON E B JR,  
Address: RT 4 BOX 1463  
City-St-Zip: MADISON, FL 32340 US

Title: VST ( ) Delete  
Name: WILSON MICHAELENA,  
Address: RT 4 BOX 1463  
City-St-Zip: MADISON, FL 32340 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILSON E B JR,  
Address: 277 NW LITTLE CAT ROAD  
City-St-Zip: MADISON, FL 32340 US

Title: VST (X) Change ( ) Addition  
Name: WILSON MICHAELENA,  
Address: 277 NW LITTLE CAT ROAD  
City-St-Zip: MADISON, FL 32340 US

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: MICHAELENA C. WILSON

Electronic Signature of Signing Officer or Director

V-PR

06/26/2007

Date