


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

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| DOCUMENT # 520053 1. Entity Name THE EDDY CORPORATION |  |
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| Principal Place of Business 45 SETON TRAIL ORMOND BEACH, FL 32176 US | Mailing Address 45 SETON TRAIL ORMOND BEACH, FL 32176 US |
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02032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 59-1708639 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent PONTIOUS, JEFFREY M 45 SETON TRAIL ORMOND BEACH, FL 32176 |
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | UD00000134963 04/28/04-80017-005 150.00 |
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| 10. OFFICERS AND DIRECTORS | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CVP EDDY, MICHAEL J 727 OCEANSHORE BLVD. ORMOND BEACH, FL 32176 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD EDDY, FRANK R JR 585 OCEAN SHORE BLVD. ORMOND BEACH, FL 32176 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TS PONTIOUS, JEFFREY M 45 SETON TRAIL ORMOND BEACH, FL 32176 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **JEFFREY M. PONTIOUS** 4.14.04 (386)673.5700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #