


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # 520053
 1. Entity Name
THE EDDY CORPORATION



Principal Place of Business Mailing Address
45 SETON TRAIL **45 SETON TRAIL**
ORMOND BEACH, FL 32176 US **ORMOND BEACH, FL 32176 US**



01132005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1708639 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)

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	CVP
NAME	EDDY, MICHAEL J
STREET ADDRESS	727 OCEANSHORE BLVD.
CITY-ST-ZIP	ORMOND BEACH, FL 32176
TITLE	PD
NAME	EDDY, FRANK R JR
STREET ADDRESS	585 OCEAN SHORE BLVD.
CITY-ST-ZIP	ORMOND BEACH, FL 32176
TITLE	TS
NAME	PONTIOUS, JEFFREY M
STREET ADDRESS	45 SETON TRAIL
CITY-ST-ZIP	ORMOND BEACH, FL 32176
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 **JEFFREY M. PONTIOUS** 4-18-05 (386) 673-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #