## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 520053** 

**Entity Name: THE EDDY CORPORATION** 

**FILED** Apr 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

45 SETON TRAIL 25 COUNTY ROAD 15 ORMOND BEACH, FL 32176 BUNNELL, FL 32110 US US

**Current Mailing Address: New Mailing Address:** 

45 SETON TRAIL 25 COUNTY ROAD 15 ORMOND BEACH, FL 32176 US BUNNELL, FL 32110 US

FEI Number: 59-1708639 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MOTTO, GREG EDDY, J.MICHAEL 45 SETÓN TRAIL 45 SETON TRAIL, SUITE 101 ORMOND BEACH, FL 32176 ORMOND BEACH, FL 32176 US 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: J.MICHAEL EDDY 04/26/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** DCVP

Title:

Name:

Address:

City-St-Zip:

Title: DCVP (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete EDDY, MICHAEL J EDDY, MICHAEL J Name:

727 OCEANSHORE BLVD. 45 SETON TRAIL, SUITE 101 Address: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

DP Title: DΡ (X) Change ( ) Addition Title: () Delete Name: Name: EDDY, F. RAYMOND JR

EDDY, F. RAYMOND JR 585 OCEAN SHORE BLVD. 25 COUNTY ROAD 15 Address: Address: ORMOND BEACH, FL 32176 BUNNELL, FL 32110 City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition ( ) Delete

MOTTO, GREG EDDY, J.MICHAEL Name: Name:

45 SETON TRAIL, SUITE 101 45 SETON TRAIL Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: ORMOND BEACH, FL 32176

Title: () Delete Title: ( ) Change (X) Addition

LANCING, ELIZABETH Name: Name: Address: Address: 25 COUNTY ROAD 15 City-St-Zip: City-St-Zip: BUNNELL, FL 32110

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.

Ρ SIGNATURE: F.RAYMOND EDDY 04/26/2007