2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704969

Entity Name: EDWARD LAWRENCE, INC.

FILED Apr 25, 2008 Secretary of State

	,, ,, ,, ,, ,			
Current Principal Place of Business:		New Principal Place of I	New Principal Place of Business:	
5444 PARK BLVD 101 PINELLAS PARK, FL 33781		515-527 9TH AVE. N ST PETERSBURG, FL 33	515-527 9TH AVE. N ST PETERSBURG, FL 33701	
Current M	lailing Address:	New Mailing Address:	New Mailing Address:	
CM6 PO BOX 4 SAINT PE	7068 TERSBURG, FL 33743	% CMG PO BOX 60068 SAINT PETERSBURG, FI		
FEI Number	: 59-1004437 FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of N	ew Registered Agent:	
6444 PAR	RONALD D K BVLD 101 PARK, FL 33781 US	WELTON, RONALD D 5444 PARK BVLD #101 PINELLAS PARK, FL 337	781 US	
	named entity submits this statement for the e of Florida.	purpose of changing its registered of	fice or registered agent, or both,	
SIGNATU	RE:		04/25/2008	
	Electronic Signature of Registered Ag	gent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete TREWHELLA, MARY 525-9TH AVE NORTH #9 SAINT PETERSBURG, FL 33701	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	SD () Delete ROBERTS, BOB 525 9TH AVE N #23 ST PETERSBURG, FL 33701	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete TOMASZEWSKI, EMILY 525 9TH AVE N #27 ST PETERSBURG, FL 33701	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete HALL, DANIEL 527 9TH AVE N #28 ST PETERSBURG, FL 33701	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name:	D () Delete GOLDEN. GLORIA	Title: () Name:	Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: MARY TREWHELLA P 04/25/2008

525-9TH AVE NORTH #22

ST PETERSBURG, FL 33701

Address:

City-St-Zip: