

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005324

FILED
Jan 22, 2007
Secretary of State

Entity Name: EDWARDS AND KELCEY ARCHITECTURAL & DESIGN SERVICES, INC.

Current Principal Place of Business:

5730 BOWDEN RD
SUITE 200
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

299 MADISON AVENUE
P.O. BOX 1936
MORRISTOWN, NJ 079621936

New Mailing Address:

299 MADISON AVENUE
MORRISTOWN, NJ 079621936

FEI Number: 22-3750310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSHESKY, JR., GERALD K
% EDWARDS & KELLEY, INC.
2252 KILLEARN BLVD
TALLAHASSEE, FL 33208 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCMAHON, KEVIN J
Address: 3 THOMPSON WAY
City-St-Zip: MORRIS PLAINS, NJ

Title: VD () Delete
Name: GARRITY, KENNETH J
Address: 61 HILEY BROOK ROAD
City-St-Zip: STOW, MA

Title: VD () Delete
Name: PILLA, MARK J
Address: 343 CONGRESS F
City-St-Zip: BOSTON, MA 02210

Title: VD () Delete
Name: HALLAHAN, RICHARD M
Address: 21 TROUT RUN DRIVE
City-St-Zip: MEDIA, PA

Title: VD () Delete
Name: CASSAVOY, MICHAEL A
Address: 45 OTIS STREET
City-St-Zip: MELROSE, MA

Title: V () Delete
Name: BOUCHARD, PAUL W
Address: 1320 BROOKSIDE LANE
City-St-Zip: NORTHBROOK, IL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFO (X) Change () Addition
Name: DAVID, THONRHILL
Address: 299 MADISON AVENUE
City-St-Zip: MORRISTOWN, NJ 07952

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KEVIN MC MAHON

CEO

01/22/2007

Electronic Signature of Signing Officer or Director

Date