

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003527

FILED
Apr 28, 2009
Secretary of State

Entity Name: EDCO GROUP, INC.

Current Principal Place of Business:

210 PARK AVENUE
SUITE 201
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

210 PARK AVENUE
SUITE 201
SANFORD, FL 32771

New Mailing Address:

PO BOX 2970
SPRINGFIELD, MO 65801

FEI Number: 44-0657294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: GLASSMAN, BILL
Address: 10411 CLAYTON ROAD, SUITE 211
City-St-Zip: ST. LOUIS, MO 63131

Title: ST () Delete
Name: GLASSMAN, BILL
Address: 10411 CLAYTON ROAD, SUITE 211
City-St-Zip: ST. LOUIS, MO 63131

Title: D () Delete
Name: GLICK, ROBERT D
Address: 10 SOUTH WACKER DRIVE, SUITE 2300
City-St-Zip: CHICAGO, IL 60601

Title: D () Delete
Name: SIEGELAAR, HERMAN
Address: P.O. BOX 827
City-St-Zip: TESUQUE, NM 87574

Title: D () Delete
Name: BENGE, DAVID
Address: 30851 ALTA MIRA DRIVE
City-St-Zip: REDLANDS, CA 92373

Title: D () Delete
Name: BENGE, JASON
Address: 708 HUNT AVENUE
City-St-Zip: SAINT HELENA, CA 94574

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 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: CAROL MESSINGHAM

CFO

04/28/2009

Electronic Signature of Signing Officer or Director

Date