2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H81644

Address:

City-St-Zip:

1746 WASHINGTON NW

LAKE PLACID, FL 33852

Entity Name: EDSCO & ASSOCIATES INC.

FILED Jan 23, 2008 Secretary of State

Littly Na	ille. EDSCO	& ASSOCIATES, INC.			
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	E GROVES RI .CID, FL 3385				
Current Mailing Address:			New Mailing Address:		
	E GROVES RI .CID, FL 3385				
FEI Number	: 59-2577727	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
The above	E GROVES RI .CID, FL 3385	2 US	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	gent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (PETERS, EDV 3949 PLACID LAKE PLACID	VIEW DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (PETERS, TRA 3949 PLACID LAKE PLACID	VIEW DR	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:) Delete N, KENNETH W	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 607, 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: TRACY PETERS S 01/23/2008