

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85985

FILED
Mar 31, 2009
Secretary of State

Entity Name: A. & D. EDWARDS & ASSOC. REALTY INC.

Current Principal Place of Business:

4141 SOUTH TAMIAMI TRAIL
21
SARASOTA, FL 342313636

New Principal Place of Business:

1737 LARAMIE STREET
SARASOTA, FL 34231

Current Mailing Address:

4141 SOUTH TAMIAMI TRAIL
21
SARASOTA, FL 342313636

New Mailing Address:

1737 LARAMIE STREET
SARASOTA, FL 34231

FEI Number: 59-2616396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, DORIS
4141 SOUTH TAMIAMI TRAIL
21
SARASOTA, FL 342313636 US

Name and Address of New Registered Agent:

EDWARDS, DORIS
1737 LARAMIE STREET
SARASOTA, FL 34231 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: _____

Electronic Signature of Registered Agent

03/31/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDWARDS, DORIS C.
Address: 4141 SOUTH TAMIAMI TRAIL STE 21
City-St-Zip: SARASOTA, FL 342313636

Title: VST () Delete
Name: EDWARDS, DORIS C.,
Address: 4141 SOUTH TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 342313636

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EDWARDS, DORIS C.
Address: 1737 LARAMIE STREET
City-St-Zip: SARASOTA, FL 34231

Title: VST (X) Change () Addition
Name: EDWARDS, DORIS C.,
Address: 1737 LARAMIE STREET
City-St-Zip: SARASOTA, FL 34231

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: DORIS C. EDWARDS

Electronic Signature of Signing Officer or Director

P

03/31/2009

Date