

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J33052

1. Entity Name
EDP FINANCIAL SERVICES, INC.

FILED
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90348 050 ***150.00

Principal Place of Business

~~926 CANDLELIGHT BLVD~~
~~BROOKSVILLE FL 34601~~
US

Mailing Address

P.O. BOX 10132
~~BROOKSVILLE FL 34601~~
US

815042



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

628 ERIN WAY

Suite, Apt. #, etc.

3. Mailing Address

628 ERIN WAY

Suite, Apt. #, etc.

City & State

BROOKSVILLE FL

City & State

BROOKSVILLE FL

4. FEI Number

59-2717166

Applied For

Not Applicable

Zip

Country

43A

Zip

Country

43A

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEAR, EDWARD V.
628 ERIN WAY
BROOKSVILLE FL 34601

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PTD
NAME GEAR, EDWARD V
STREET ADDRESS ~~628 ERIN WAY~~ 628 ERIN WAY
CITY-ST-ZIP BROOKSVILLE FL 34601

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
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CITY-ST-ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edward V. Gear EDWARD V. GEAR 352-799-8076
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 2-15-01 Daytime Phone #

CR2E034 (10/00)