2007 FOR PROFIT CORPORATION

Jul 05, 2007 08:00 AM ANNUAL REPORT **Secretary of State** DOCUMENT # L00179 EDWARDS REALTY INC. Principal Place of Business Mailing Address 1415 N. ATI ANTIC AVENUE 1415 N. ATLANTIC AVENUE COCOA BEACH, FL 32931 COCOA BEACH, FL 32931 07032007 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2957314 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DURGIN, LISA A 1701 BAYSHORE DR COCOA BEACH, FL 32931 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent Sugnature, Exped or printed harde of organiered agent and title if applicable (NOTE: Registered Agent Signatura regulated when reinstating) 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the \$5.00 May Be FILE NOW!!! FEE IS \$150.00 \Box corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS 10. PD TITLE DURGIN, LISA A NAME U00000766962 STREET ADDRESS 1701 BAYSHORE DR COCOA BEACH, FL 32931 07/05/07-80005-003 150.00 CDY-SI-ZIP TITLE DURGIN, DAVID B NAME STREET ADDRESS 1701 BAYSHORE DR DITY-ST-ZIP COCOA BEACH, FL 32931 TITLE NAME STREET ADDRESS DO NOT WRITE CRY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-71P INLE MALIE STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

321 784 - 3600

FILED