

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

3 **FILED**
Apr 25, 2005 8:00 am
Secretary of State

03-24-2005 90204 049 ****50.00

DOCUMENT # L04000039408					
1. Entity Name EDNBET, LLC					
Principal Place of Business 5635 S. HIGHWAY A1A, SUITE 304 MELBOURNE BEACH, FL 32951			Mailing Address 5635 S. HIGHWAY A1A, SUITE 304 MELBOURNE BEACH, FL 32951		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1157286	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent JONES FOSTER SERVICE, LLC 505 SOUTH FLAGLER DRIVE SUITE 1100 WEST PALM BEACH, FL 33401			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEMBER Edward B. Boyer 5635 S. Highway A1A, Suite 304 Melbourne Beach, FL 32951 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGING MEMBER ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEMBER Betty L. Boyer 5635 S. Highway A1A, Suite 304 Melbourne Beach, FL 32951 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGING MEMBER ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEMBER Cynthia L. Cullen 100 Lark Drive Holland, PA 18966 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGING MEMBER ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MEMBER Kent E. Boyer 35 Summit Trace Road Langhorne, PA 19047 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGING MEMBER ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>Edward B. Boyer</u>			3/18/05 321725-3905		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

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