2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

DOCUMENT# L08617

Entity Name: CECIL EDGE & ASSOCIATES, INC.

Current Principal Place of Business:

6212 BAYSHORE BLVD
UNIT K
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

6212 BAYSHORE BLVD
UNIT K
TAMPA, FL 33611

New Mailing Address:

FEI Number: 59-2966108 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSS, JEREMY P
220 SO FRANKLIN STREET
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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 Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: EDGE, CECIL E JR,
Address: 3212 BAYSHORE BLVD UNIT K
City-St-Zip: TAMPA, FL 33611

Title: DVS ( ) Delete
Name: EDGE, LINDA B,
Address: 3212 BAYSHORE BLVD UNIT K
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete
Name: EDGE, KEVIN L.,
Address: 3127 LA CLEDE AVENUE
City-St-Zip: LOS ANGELES, CA 90039

Title: D ( ) Delete
Name: EDGE, SHANNON
Address: 3314 NAPOLEON STREET
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete
Name: EDGE, CATHLEEN
Address: 165 WINDSOR CIRCLE
City-St-Zip: CHAPEL HILL, NC 27516

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: EDGE, CATHLEEN
Address: 765 A CHESTNUT STREET
City-St-Zip: GREENSBORO, NC 27405

I hereby certify that the information supplied with this filing does not qualify for the 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: CECIL EDGE, JR. PRES 04/29/2006

Electronic Signature of Signing Officer or Director Date