2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005507

Entity Name: USS EDISTO ASSOCIATION, INC.

FILED Jul 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 747 4155 ARLINGTON AVENUE MIMS, FL 327540747 MIMS, FL 327545028

Current Mailing Address: New Mailing Address:

P.O. BOX 747 MIMS, FL 327540747

FEI Number: 47-0944863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, GLENN D 4155 ARLINGTON AVENUE MIMIS, FL 327545028 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete SMITH, GLENN D SMITH, GLENN D Name: Name: Address: 4155 ARLINGTON AVE. Address: 4155 ARLINGTON AVE. City-St-Zip: MIMS, FL 327540747 City-St-Zip: MIMS, FL 327540747

Title: Title: (X) Change () Addition () Delete PAULK, VIRGIL Name: Name: PAULK, VIRGIL

Address: 4413 ST. GEORGE DR. Address: 4413 ST. GEORGE DR. City-St-Zip: OKLAHOMA CITY, OK 73120 City-St-Zip: OKLAHOMA CITY, OK 73120

Title: () Delete Title: () Change () Addition

GALLANT, WILLIAM Name: Name: Address: 55 HOWE ST Address: City-St-Zip: METHUEN, MA 018443239 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: FETTINGER, EUGENE Name: JENSEN, JAMES M Address: 1926 PARKWAY DR Address: N 4792 HOMESTEAD RD City-St-Zip: CRESCENT CITY, CA 95531 City-St-Zip: HAWKINS, WI 54530 95

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN D. SMITH DIR 07/05/2007