## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000009117

FORT MYERS, FL 33901

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

DOCOM	1EN 1# NU5000009117		Secretary of State	
Entity Nar	ne: EDISON ART VILLAGE, INC.			
Current Principal Place of Business:		New Principal Place of I	Business:	
1412 WINK FORT MYE	KLER AVE ERS, FL 33901			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
1412 WINK	KLER AVE			
APT. E FORT MYE	ERS, FL 33901			
FEI Number:	,	) FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agen	t: Name and Address of N	ew Registered Agent:	
1619 JACK	PH, MICHAEL D KSON STREET ERS, FL 33901 US	RANDOLPH, MICHAEL D 2235 FIRST STREET FORT MYERS, FL 33901		
	named entity submits this statement for second contract of the statement for second contract of the statement for second contract of the	the purpose of changing its registered of	fice or registered agent, or both,	
SIGNATURE: MICHAEL D. RANDOLPH			04/30/2009	
	Electronic Signature of Registered	d Agent	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PVT () Delete SAND, LOU B 1412 WINKLER AVE FORT MYERS, FL 33901	Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () Delete SAND, LOU 1412 WINKLER AVENUE FORT MYERS, FL 33901	Title: ( ) Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address:	S ( ) Delete D'ALESSANDRO, PETE C/O 2247 1ST ST	Title: ( ) Name: Address:	Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: LOU B. SAND P 04/30/2009