2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 21, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # N22911 ED DAY, INC.					C	93-21-2006	90021 03	6 ****61.:	25
Principal Place of Business C/O ELIZABETH FOSTER FORGUSON 557 RONNOC LANE NEW SMYRNA BEACH, FL 32168 US Malling Address PO BOX 1126 NEW SMYRNA BEACH, FL NEW SMYRNA BEACH, FL				70 US				18 1 1		N ila 81 181 1
2. Principal P	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				02062006	Chg-NP	CR2E0	37 (11/05)	
City & State		City & State				4. FEI Number 59-29057	22			plied For
Zlp Country		Zip Co		untry	y 5. Certificate		Status Desired		\$8.75 Add	litional
	6. Name and Address of Current F	l Registered Agent		I	L	7. Name and Ac	dress of New	Registered		
FOSTED FORCILGON ELIZABETH				Name	Name					
FOSTER FORGUSON, ELIZABETH 2026 TRAVLERS PALM DR EDGEWATER, FL 32141				Street Ac	et Address (P.O. Box Number is Not Acceptable)					
				City				FL	Zip Cod	e
The above named entity submits this statement for the purpose of changing its regist				red office or						
	ions of registered agent.	ore purpose or criary	ang ko rogisto		- Cgiotoio	or again, or boar,	ar are cases or	ronde, run	ranna mu,	and docopt
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SIGNATURE	hyalate L	roigue						2/17	_ما0	 .
	elignature, typed of printed name of registered agent a	патию и артоваже.	(NOTE: Register	an waan siduzin	ne required a	when reinstating)		/ DATE/		
	Filling Fee is \$81.25 Due by May 1, 2008	9. Elect	ion Campaign Fund Contribu	Financing		\$5.00 May Be Added to Fees	FI	Make check		
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIR	9. Elect	ion Campaign	Financing ition.		\$5.00 May Be	1	orida Depar	tment of SI	ate 10
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12. I hereby 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 office or of 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.