

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000047160

Entity Name: E-DEAI INC.

FILED  
Feb 15, 2011  
Secretary of State

**Current Principal Place of Business:**

6007 N. TROPICAL TRAIL  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

6007 N. TROPICAL TRAIL  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

FEI Number: 65-1085561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ETHERIDGE, BRIAN N  
6007N TROPICAL TRAIL  
MERRITT ISLAND, FL 32953 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

**OFFICERS AND DIRECTORS:**

Title: COBP  
Name: ETHERIDGE, DIANA C  
Address: 6007 N. TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VPD  
Name: ETHERIDGE, BRIAN N  
Address: 6007 N. TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D  
Name: ETHERIDGE, JULIANA L  
Address: 601 HIGH STREET  
City-St-Zip: DENVER, CO 80218

I hereby 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 all other like empowered.

SIGNATURE: BRIAN ETHERIDGE

VP

02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date