

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000056355

1. Entity Name
EDGE FORWARD EARLY LEARNING CENTER, INC.



FILED

04 FEB 23 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2111 S. RIDGEWOOD AVE.
EDGEWATER, FL 32141

Mailing Address
2111 S. RIDGEWOOD AVE.
EDGEWATER, FL 32141

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01222004

Chg-P

CR2E034 (10/03)

4. FEI Number

04-3592629

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VIVIAN, VINCENETTE
2111 S. RIDGEWOOD AVE.
EDGEWATER, FL 32141

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT. ^{ne} VIVIAN, VINCENETTE
827 FLOURDER AVE
NEW SMYRNA BEACH, FL 32169

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Delete

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500029313895
02/24/04--01049--017 **150.00

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Vincenette Vivian

Vincenette Vivian

Date

Daytime Phone #

(386)

1/30/04 426-2460