

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013876

Entity Name: NANCY S. EDWARDS, INC.

FILED
Apr 19, 2006
Secretary of State

Current Principal Place of Business:

13981 LAKE MAHOGANY BLVD.
2514
FT. MYERS, FL 33907

Current Mailing Address:

13981 LAKE MAHOGANY BLVD.
2514
FT. MYERS, FL 33907

New Principal Place of Business:

3221 COTTONWOOD BEND
501
FT. MYERS, FL 33905

New Mailing Address:

3221 COTTONWOOD BEND
501
FT. MYERS, FL 33905

FEI Number: 32-0020842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, NANCY S
13981 LAKE MAHOGANY BLVD.
2514
FT. MYERS, FL 33907 US

Name and Address of New Registered Agent:

EDWARDS, NANCY S
3221 COTTONWOOD BEND
501
FT. MYERS, FL 33905 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: NANCY S. EDWARDS

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EDWARDS, NANCY S
Address: 13981 LAKE MAHOGANY BLVD. #2514
City-St-Zip: FT. MYERS, FL 33907

Title: D () Delete
Name: EDWARDS, EDWARD R
Address: 13981 LAKE MAHOGANY BLVD. #2514
City-St-Zip: FT. MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EDWARDS, NANCY S
Address: 3221 COTTONWOOD BEND #501
City-St-Zip: FT. MYERS, FL 33905

Title: D (X) Change () Addition
Name: EDWARDS, EDWARD R
Address: 3221 COTTONWOOD BEND #501
City-St-Zip: FT. MYERS, FL 33905

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY S. EDWARDS

PRES

04/19/2006

Electronic Signature of Signing Officer or Director

Date