

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 91060 025 \*\*\*150.00

0428448 AV

**DOCUMENT # P02000117539**

1. Entity Name  
**ARDLEY COURT CONSULTANTS, INC.**



Principal Place of Business  
**1001 U.S. HIGHWAY ONE  
SUITE 400  
JUPITER FL 33477**

Mailing Address  
**1001 U.S. HIGHWAY ONE  
SUITE 400  
JUPITER FL 33477**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**55-0805153**

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

**EDWARDS, M. CHRIS  
1001 U.S. HIGHWAY ONE  
SUITE 400  
JUPITER FL 33477**

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, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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 **P, T, S, D** ☐ Delete  
NAME **M. CHRIS EDWARDS**  
STREET ADDRESS **1001 N. US. HIGHWAY ONE, STE 400**  
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **P, T, S, D** ☐ Change ☐ Addition  
NAME **M CHRIS EDWARDS**  
STREET ADDRESS **1001 N. US HIGHWAY ONE, STE 400**  
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **VP, D** ☐ Delete  
NAME **RENEE EDWARDS**  
STREET ADDRESS **1001 N. US. HIGHWAY ONE, STE 400**  
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE **VP, D** ☐ Change ☐ Addition  
NAME **RENEE EDWARDS**  
STREET ADDRESS **1001 N US HIGHWAY ONE, STE 400**  
CITY-ST-ZIP **JUPITER, FL 33477**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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:

**REQUIRED PRES.**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**M. CHRIS EDWARDS**

**4/18/03**  
Date

**561-743-0480**  
Daytime Phone #

CR2E034 (10/02)