2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Secretary of State DOCUMENT # P03000096890 03-05-2007 90053 012 ***150.00 1. Entity Name EDGEWATER RESIDENTIAL CONSTRUCTION, INC. Principal Place of Business Mailing Address 40022600 11038 MIDDLE BCH RD. P. O. BOX 9399 PANAMA CITY BCH, FL 32407 PANAMA CITY BCH, FL 32407 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 10200 Clarence Street Suite, Apt. #, etc. 01312007 CR2E034 (12/06) City & State Panama City Beach, City & State 4. FEI Number Applied For 14-1895932 Not Applicable Country Zin Country \$8.75 Additional 5. Certificate of Status Desired 32407 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WALTERS, ELIZABETH J'ESQ. Street Address (P.O. Box Number is Not Acceptable) 221 MCKENZIE AVE. PANAMA CITY, FL 32401 City Zip Code Fl 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 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete ☐ Change ☐ Addition HARRIS, J. DAVID NAME NAME STREET ADDRESS 11038 MIDDLE BCH RD. STREET ADDRESS CITY-ST-ZIP PANAMA CITY BCH, FL 32407 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NALL, J. WALLACE JR. NAME STREET ADDRESS 119 EUCLID AVE. STREET ADDRESS CITY-ST-ZIP BIRMINGHAM, AL 35213 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BURNHAM, WESLEY L JR. NAME 11212 FRONT BCH RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PANAMA CITY BCH, FL 32407 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 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

J. David Harris

2/16/07 (850)234-72\$2

Daytime Phone #

FILED Mar 05, 2007 8:00 am