

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000112466

Entity Name: EDCOLAW, INC.

FILED
Feb 27, 2012
Secretary of State

Current Principal Place of Business:

200 WEST FORSYTH STREET - SUITE 1300
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

200 WEST FORSYTH STREET - SUITE 1300
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 20-0333151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, DAVID
200 WEST FORSYTH STREET - SUITE 1300
JACKSONVILLE, FL 32202 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: DP
Name: EDWARDS, DAVID J
Address: 200 WEST FORSYTH STREET - SUITE 1300
City-St-Zip: JACKSONVILLE, FL 32202

Title: DVT
Name: COHEN, DAVID
Address: 200 WEST FORSYTH STREET - SUITE 1300
City-St-Zip: JACKSONVILLE, FL 32202

Title: VP
Name: SANDERS, KARL J
Address: 200 WEST FORSYTH STREET - SUITE 1300
City-St-Zip: JACKSONVILLE, FL 32202

Title: V
Name: DAWSON, GREGORY M
Address: 200 WEST FORSYTH STREET - SUITE 1300
City-St-Zip: JACKSONVILLE, FL 32202

Title: V
Name: MANGU, JEAN M
Address: 200 WEST FORSYTH STREET - SUITE 1300
City-St-Zip: JACKSONVILLE, FL 32202

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: DAVID COHEN

DVT

02/27/2012

Electronic Signature of Signing Officer or Director

Date