

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000133705

Entity Name: LARRY EDGE CONST., INC.

FILED
Sep 11, 2007
Secretary of State

Current Principal Place of Business:

126 2ND STREET
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1166
NICEVILLE, FL 32588 US

New Mailing Address:

FEI Number: 80-0099536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDGE, LARRY R
126 2ND STREET
NICEVILLE, FL 32578 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: DPS () Delete
Name: EDGE, LARRY R
Address: P O BOX 1166
City-St-Zip: NICEVILLE, FL 32588 US

Title: DVT () Delete
Name: EDGE, BEVERLY C
Address: P O BOX 1166
City-St-Zip: NICEVILLE, FL 32588 US

Title: D (X) Delete
Name: EDGE, MATTHEW R
Address: P O BOX 1166
City-St-Zip: NICEVILLE, FL 32588 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LARRY R EDGE

DPS

09/11/2007

Electronic Signature of Signing Officer or Director

Date