## 2005 FOR PROFIT CORPORATION

## **ANNUAL REPORT**

STREET ADDRESS

CITY-ST-ZIP.

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## Apr 18, 2005 8:00 am Secretary of State 04-18-2005 90316 020 \*\*\*150.00 **DOCUMENT # P0400003272** 1. Entity Name EDWARDS CONCRETE AND KOOL DECK'S, INC. Principal Place of Business Mailing Address 50037231 7932 SOUTHSIDE BLVD 8727 TOUCHTON RD #2601 #510 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32246 2. Principal Place of Business 3. Mailing Address Suite; Apt; #teto: Sulle, Apt. #, etc. 03142005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 52-2437764 Not Applicable Zip Country Country Zio \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EDWARDS, WILLIE Street Address (P.O. Box Number is Not Acceptable) 9727 TOUCHTON RD #510 JACKSONVILLE, FL 32246 Zio Code FI 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 tNOTE: Pegistered Agent signature required when remstating t and title it applicable -9.-Election Campaign Financing \$5:00'May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 101.8 Defeta (((L) Change Addition EDWARDS, WILLIE LII NAME MAME STREET ADDRESS 9727 TOUCHTON RD STREET ADDRESS CHY-ST-ZIP JACKSONVILLE, FL 32246 GHY-S1-2(P TITLE Delete TOLE Change Addition 🔲 NAME NAME STREET ADDRESS STREET ADDRESS CRY-ST-ZIE CITY+ST-ZiP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP City-St-ZiP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME

**FILED** 

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12. Thereby cortify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(), Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 embowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

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