2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000027796

1. Entity Name
EDD GRILLE CORP



Principal Place of Business

5112 NW 34TH ST GAINESVILLE, FL 32605 Mailing Address

5112 NW 34TH ST GAINESVILLE, FL 32605

05 US

FILED
Aug 08, 2006 08:00 AI

ecsecretary of State

Daytime Phone #

2676



DO	NOT	WRITE	·IN	THIS	SPACE

08022006 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired San Required

5. Required

6. Name and Address of Current Registered Agent

DUGGER, EDWARD L 3720 NW 43RD ST STE 100 GAINESVILLE, FL 32606

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF ST

DO NOT WRITE IN THIS SPACE

			•		
	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of regulatured agent and title	of applicable (NOTE, Registered	l Agent signature	required when reinstating)	DATE
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	Election Campaign Finan Trust Fund Contribution.	cing .	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. ,	OFFICERS AND DIRE	CTORS		W. J. W.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUGGER, EDWARD L 3720 NW 43RD ST, STE 100 GAINESVILLE, FL 32606		¥.20		U00000573800 08/08/06-80002-007:150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUSSIEN, DARREN 6910 SW 46TH AVE GAINESVILLE, FL 32608				08/08/06-80002-007:150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MESSINA, DAMON 7276 60TH AVE N ST. PETERSBURG, FL 33709			DO	NOT WRITE
NAME STREET ADDRESS CITY-ST-ZIP				IÑ.	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.