2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119631

Entity Name: EDWARDS TRANSPORT INC

FILED Apr 10, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
	BLEWEED RUN SSEE, FL 32311		
Current Mailing Address:		New Mailing Address:	
	AGNOLIA DRIVE SSEE, FL 32301		
FEI Number	: FEI Number Applied For	(X) FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	l Address of Current Registered Ago	ent: Name and Address of New Registered Agent:	
1183 TUM TALLAHA	L, AUDLEY BLEWEED RUN SSEE, FL 32311 US		
	e named entity submits this statement for e of Florida.	or the purpose of changing its registered office or registered agent, or both	
SIGNATUI	RE:		
	Electronic Signature of Register	red Agent Date	
Election Ca	mpaign Financing Trust Fund Contribution (().	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	P () Delete CAMPBELL, AUDLEY 1183 TUMBLEWEED RUN TALLAHASSEE, FL 32311	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	V () Delete CAMPBELL, ALICE 2003 ROSSELLE ST JACKSONVILLE, FL 32202	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	S () Delete CAMPBELL, AUDIA 1183 TUMBLEWEED RUN TALLAHASSEE, FL 32311	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	S () Delete HOBBS, HORACE ASST. 496 DEWEY JOHNSON RD GRETNA, FL 32332	Title: T (X) Change () Addition Name: CAMPBELL, TAKARA Address: 1183 TUMBLEWEED RUN City-St-Zip: TALLAHASSEE, FL 32311	
Title: Name: Address:	T (X) Delete CAMPBELL, TAKARA 1183 TUMBLEWEED RUN	Title: () Change () Addition Name: Address:	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: AUDLEY CAMPBELL P 04/10/2007

City-St-Zip: TALLAHASSEE, FL 32311