

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135838

FILED  
Jul 12, 2005  
Secretary of State

**Entity Name:** THE EDWARDS PLANTATION OF SOUTH FLORIDA, INC.

**Current Principal Place of Business:**

8607 SOUTHLAKE CIRCLE  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

8607 SOUTHLAKE CIRCLE  
FORT MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 20-1680672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MASSIE, CHARLES A  
12065 METRO PKWY STE 101  
FORT MYERS, FL 33901 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: EDWARDS, W. LANE JR  
Address: 8607 SOUTHLAKE CIRCLE  
City-St-Zip: FORT MYERS, FL 33908

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: W LANE EDWARDS JR

PD

07/12/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date