2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2008 08:00 A
Secretary of State

| 1. Entity Nan | MENT # P0500006850 s edge sports pub, inc. | | Secretary of St | | | | |
|---------------------------------|---|--|-----------------------------------|------------------------|---------------------|---------------------------------------|------------------------------|
| Principal Plac | ce of Business | Mailing Address | | 1 | | | |
| 30 CR 532 Bushnell, | El 22512 | 30 CR 532 | | | | | |
| DOSHNELL, | rt 33313 | BUSHNELL, FL 33513 | | 110010001111 | | | |
| | | | | | | | |
| DO NOT WRITE IN THIS SPA | | | 01212008 No Chg-P CR2E034 (11/05) | | | | /05) |
| i | O NOI WHILE I | N I I II I S SPA | CE | 4. FEI Numbe | | | Applied For |
| | | | | 20-282 | | \$8.7º | Not Applicable 5 Additional |
| | 6. Name and Address of Current Reg | | | 5. Certificate | of Status Desired | | equired |
| 30 CR 532 BUSHNEL | L, FL 33513 a named entity submits this statement for the tions of registered agent. | | | IN 7 | NOT -W THIS SF | PACE orida. Lam familiar | with, and accept |
| | Signature, typed or printed name of registered agent and life | le if applicable (NOTE Registers | id Agent signature require | d when reinstating) | | DATE | |
| FIL After M | .E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00 | Eléction Campaign Final Trust Fund Contribution. | _ ~ | .00 May Be led to Fees | | | |
| 10 | OFFICERS AND DIRI | ECTORS | | | | · · · · · · · · · · · · · · · · · · · | |
| TITLE NAME | P WEBER, KENNETH J | | | | | | |
| STREET ADDRESS | 30 CR 532 | | | | | | |
| CITY-ST-ZIP | BUSHNELL, FL 33513 | | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | U00000 04/04/08- |)864683 -80024-017 | 150.00 |
| HILL | 1 | | Ī | | | | |

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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.

SIGNATURE:

STREET ADDRESS

CHY-SI-ZIP

NAME STREET ADDRESS CITY+ST-ZiP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

Lu Weber Ken Weber

3/18/08 352-636-32

Daytime Phone