

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010017

FILED
Mar 23, 2009
Secretary of State

Entity Name: EDENFIELD CORPORATION

Current Principal Place of Business:

1305 BRENWAY DR
MASCOTTE, FL 34753 US

New Principal Place of Business:

1649 HASTINGS RD
PIERSON, FL 32810 US

Current Mailing Address:

1305 BRENWAY DR
MASCOTTE, FL 34753 US

New Mailing Address:

1649 HASTINGS RD
PIERSON, FL 32810 US

FEI Number: 20-8362125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDENFIELD, WESLEY A
1305 BRENWAY DR
MASCOTTE, FL 34753 US

Name and Address of New Registered Agent:

EDENFIELD, WESLEY A
1649 HASTINGS RD
PIERSON, FL 32810 US

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: WESLEY A. EDENFIELD

03/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDENFIELD, WESLEY A
Address: 1305 BRENWAY DR
City-St-Zip: MASCOTTE, FL 34753 US

Title: DIR () Delete
Name: EDENFIELD, MICHAEL W
Address: 1305 BRENWAY DR
City-St-Zip: MASCOTTE, FL 34753 US

Title: DIR () Delete
Name: EDENFIELD, JEFFRY T
Address: 1305 BRENWAY DR
City-St-Zip: MASCOTTE, FL 34753 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EDENFIELD, WESLEY A
Address: 1649 HASTINGS RD
City-St-Zip: PIERSON, FL 32810 US

Title: DIR (X) Change () Addition
Name: EDENFIELD, MICHAEL W
Address: 1649 HASTINGS RD
City-St-Zip: PIERSON, FL 32810 US

Title: DIR (X) Change () Addition
Name: EDENFIELD, JEFFRY T
Address: 1649 HASTINGS RD
City-St-Zip: PIERSON, FL 32810 US

Title: DIR () Change (X) Addition
Name: EDENFIELD, JAMES T
Address: 1649 HASTINGS RD
City-St-Zip: PIERSON, FL 32810 US

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

SIGNATURE: WESLEY A.

P/D

03/23/2009

Electronic Signature of Signing Officer or Director

Date