FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000057839 (1)

EDGEHILL, INC.

4 XVAZY 1, 1947

FILED Apr 04 1997 8:00am Secretary of State



		Sout Swamper	•						
Principal Place of Business Mailing Address						- A TABITABLI DIA LADAR TILLI ARUK RANK	, 90 (04 0 40) (1		1 (81) (89)
7306 MARSH PORT ST. LU	i Terrace Ucie Fl 34986-3233	7306 MARSH TERRACE PORT ST. LUCIE FL 349	66-3233						
						3. Date Incorporated or Qualified 08/18/1993		e of Last R	eport
2. Priocipa!	Place of Business	2a. Mailing Address				4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Ar	plied For
21		26	~ ~~			65-0540999			ot Applicable
- Strite, Δρ 22	t #, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired
City & St	ate	City & State				6. Election Campaign Financing	r-1	\$5.00	
23 Zip	Country	28 Zip	Cou	intry		Trust Fund Contribution 8. This corporation has liability for	intoppillo i	Added t	
24	25	29	30		1		Yes [. 199.032,
		Current Registered Agent				10. Name and Address of New Re			
YA	NTES, CYRIL M			81	Name				
73	7306 MARSH TERRACE				82 Street Address (P.O. Box Number is Not Accepta				
PC	ORT ST. LUCIE FL 34986-32	33		B3	······································				
								7-1-	
				84	City		FL	85 Zip (Code
office o	rica stered agent or both, in th	607.0502 and 607.1508, Fiorida Stati e State of Florida. Such change was e obligations of, Section 607.0505, F	s authorize	d by	the corporation	oration submits this statement for the pon's board of directors. I hereby acce	ourpose of pt the appo	changing it intment as	is registered registered
SIGNATURE	Regulative type that painted games of regul	throut agent as dittle diapplication (NC	Off Registered	d Agen	niuper eru:segia tr	ed when reinstating)	DATE		
12.	OFFICE	RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TIJLF	VATEO DONALD	DELETE	1.1 1)		Ī			Change	Addition
NAME	YATES, DONALD 7306 MARSH TERRACE		1.2 N/						
STREET ASIDRES	PORT ST. LUCIE FL 349				ADDRESS				÷
CI*Y+\$1+ZiP TiT.E	S COUNTRY OF STREET	DELETE	1 4 CI 2 1 TI	TLE	- ZIP		····-	Change	Addition
MAME	MARY LOU YATES	£ DELETE	22 N		1			Onungo	L. Addition
STREET ADDRESS	TARA MAROU TERRACE				ADDRESS				
Elly-SI-70	PORT ST. LUCIE FL 34	1986-3-23		ITY - SI					
THE		DELETE	3.1 Ti			**************************************		Change	Add tion
NAME			3.2 N/	AME					
STREET ADDRES	S		3.3 SI	TREET A	ADDRESS				
City - ST - ZIP			3.4. C	TY-\$1	T-21P				
TIFLE		DELETE	4.1 10					Change	Addition
NAME			4. 2 N	AME					
STREET ADDRES	5		4351	TREET A	address				
CHY+51-Zir			4 4 C	TY-ST	- ZIP				
MUE		☐ DELETE	5170		Ì			☐ Change	Addition
NAME			5.2 N/						
STHEFT ACCRES	2		5.3 \$7	TREET	ADDRESS	•			
CHY-51-ZiP		br. Eve		17Y-ST	- ZIP			[] Ob	
THILE		☐ DELETE	6 1 TI					Change	Addition
NAME:			6.2 N/		}				
STREET ADDRES	5				ADDRESS				
CHY_S1-7iP	!		640	ITY-ST	- 7IP				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an off per 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: