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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000038257 (9)

EDISON SUNDRY CORPORATION

Principal Place of Business
14751 EDEN ST. FT. MYERS FL 33908
FT. MYERS FL 33908

Mailing Address

FILED Apr 18 1997 8:00am Secretary of State



14751 EDEN ST. FT. MYERS FL 33908		14751 EDEN ST. FT. Myers FL 33908-1642							
						05/16/1994 04/		Date of Last Report /10/1996	
2. Principal Pl	ace of Business	2a. Mailing Address	. Mailing Address			4. FEI Number		Applied For	
21]		26				65-0488478		Not Applicable	
Suite, Apt a	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	3	City & State				6. Election Campaign Financing	\$5.	00 May Be	
23		28				Trust Fund Contribution	☐ Add	ded to Fees	
Zip	Country	Zip	C	ountry		8. This corporation has liability for i		er s. 199.032,	
24	25	29	30				Yes No		
5_i	9. Name and Address of Curi	rent Registered Agent				10. Name and Address of New Re	gistered Agent		
MASS	SIE, CHARLES A			81	Name				
	14751 EDEN ST.					dress (P.O. Box Number is Not Acceptab	le)		
	FT. MYERS FL 33908					aress (F.O. Box Number is Not Acceptab	10)		
1 1. 0	TICHO I E GOSTO			83					
				84	City		FL 85	Zip Code	
		see a see El de Guer	A Al					no ite registered	
11. Pursuant I	to the provisions of Sections 607.0 enistered arient, or both, in the Sta	0502 and 607.1508, Florida Statu ate of Florida, Such change was	tes, the authori	wood od bes	e-named con the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appointmen	it as registered	
agent. La	m familiar with, and accept the ob	ligations of Section 607.0505, F	torida S	tatute	3.	ation's board of directors. I hereby accep	1		
SIGNATURE)	Palerd	manne							
	Standard types or profest name of registered				int signature requ	ulred when reinstaling)	DATE	TODO 11.40	
12.		AND DIRECTORS	1;			ADDITIONS/CHANGES TO OFFIC			
TPUE	DP	☐ DELETE	1.1	TITLE			∐ Cha	nge 🗌 Addition	
NAME	Massie, Charles A		1.2	NAME					
SUREET ADDRESS	14751 EDEN ST.		1.3	STREET	ADDRESS				
CITY-ST-ZIP	FT. MYERS FL 33908		1.4	CITY-S	ST - ZIP				
THILE	DS	DELETE 2.1					Cha	nge 🛄 Addition	
NAME	MASSIE, BETTY A		2.2	2.2 NAME					
STRELT ADDRESS	14751 EDEN ST.		2.3	STREET	ADDRESS				
	FT. MYERS FL 33908			4 CITY -					
CITY-ST-7P TITUE	DV	DELETE 3.			31-211		☐ Cha	nge Addition	
	JACOBS, BRUCE P	San Cara		2 NAME					
NAME	6799 HIGHLAND PINES CR.		1						
STREET ADDRESS					ADDRESS				
CITY - S1 - ZF	FT. MYERS FL 33912	T per per	_	4. CHY-	ST - ZIP		Cha	noe Addition	
1014E	DT	DELETE	1	1 TITLE			ii Urk	niða 🗂 vandibil	
NAME:	JACOBS, ROBIN J		4	2 NAME					
STREET ADORESS	6799 HIGHLAND PINES CR.		4.3	3 STREE	F ADDRESS				
C(TY+S1+7IP	FT. MYERS FL 33912	,		4 CITY-	ST-ZIP				
THILF		☐ DELETE	5.	1 TITLE			Cha	inge L. Addition	
NAM:			5.	2 NAME	1				
STREET ADDRESS			5.	3 STREE	I ADDRESS				
C-TY ST-7(P			5.	4 CITY -	ST-ZIP				
TIPLE		DELETE		1 TITLE			Cha	ange 🔲 Addition	
NAME				2 NAME					
					T ADDRESS				
STREET ADDRESS									
OTY-ST ZIP	L		6.	4 CITY-		and in Continue 110 07/2Vi) Florido Statuto	a I further cortifu	that the	

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 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 12 or Block 13 if changed or on an attachment with an address. (9H)