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FILED

Jan 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000039482 (2)

1. Corporation Name  
E & D CUTTING TOOLS, INC.



Principal Place of Business

13648 CROFT DR.  
LARGO FL 34644

Mailing Address

13648 CROFT DR.  
LARGO FL 33774-3119

2. Principal Place of Business

21 13648 CROFT DR.

Suite, Apt. #, etc.

City & State

23 LARGO, FL.

Zip Country

24 33774 25

2a. Mailing Address

26 13648 CROFT DR.

Suite, Apt. #, etc.

City & State

28 LARGO, FL.

Zip Country

29 33774 30

3. Date Incorporated or Qualified

05/25/1994

3a. Date of Last Report

04/30/1996

4. FEI Number

59-3246100

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NEWBOULD, EDWARD H  
13648 CROFT DR.  
LARGO FL 34644

10. Name and Address of New Registered Agent

81 Name  
NEWBOULD EDWARD H

82 Street Address (P.O. Box Number is Not Acceptable)

13648 CROFT DR.

83

84 City  
LARGO

FL

85 Zip Code  
33774

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME NEWBOULD, EDWARD H

STREET ADDRESS 13648 CROFT DR.

CITY-ST-ZIP LARGO FL 34644

TITLE ☐ DELETE

NAME NEWBOULD, DONNA L

STREET ADDRESS 13648 CROFT DR.

CITY-ST-ZIP LARGO FL 34644

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME NEWBOULD, EDWARD H

1.3 STREET ADDRESS 13648 CROFT DR.

1.4 CITY-ST-ZIP LARGO, FL. 33774

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME NEWBOULD, DONNA L.

2.3 STREET ADDRESS 13648 CROFT DR.

2.4 CITY-ST-ZIP LARGO, FL. 33774

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 included 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.

SIGNATURE: Donna Newbould DONNA NEWBOULD 1-16-97 813-596-5013

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)