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May 06 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 # P94000047553 (0)

1. Corporation Name
TRIPLE EEE, INC.

Principal Place of Business
1803 S.W. 13TH ST.
GAINESVILLE FL 32608

Mailing Address
1803 S.W. 13TH ST.
GAINESVILLE FL 32608-1524



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/20/1994		3a. Date of Last Report 04/04/1996	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 59-3253674		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country		29. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
EDWARDS, ANDREA K 3787 S.W. 58 RD GAINESVILLE FL 32608				81. Name Angela Hunter-Edwards			
				82. Street Address (P.O. Box Number is Not Acceptable) 6211 SW 137th Ave.			
				83. Archer, Florida 32618			
				84. City Archer			
				FL 85 32618			

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: *Angela Hunter-Edwards* 7/29/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	EDWARDS, ANDREA K 3787 SW 58 RD. GAINESVILLE FL 32608	1.1 TITLE President	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME		1.2 NAME Ron R. Edwards	
STREET ADDRESS		1.3 STREET ADDRESS 6211 S.W. 137th Ave	
CITY - ST - ZIP		1.4 CITY - ST - ZIP Archer, Florida 32618	
TITLE VP	EDWARDS, CONNIE F 3787 SW 58 RD. GAINESVILLE FL 32608	2.1 TITLE Secretary/Tressure	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
NAME		2.2 NAME Angela Hunter-Edwards	
STREET ADDRESS		2.3 STREET ADDRESS 6211 Sw 137th Ave.	
CITY - ST - ZIP		2.4 CITY - ST - ZIP Archer, Florida 32618	
TITLE ST	EDWARDS, DAVID K 207 N.W. 20TH DR GAINESVILLE FL 32603	3.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	Change <input type="checkbox"/> Addition <input type="checkbox"/>
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 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.

SIGNATURE: *Angela Hunter-Edwards* 7-29-97 392-1218
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)