FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT



FLORIDA DEPARTMENT OF STATE

ANNUA	PORATION AL REPORT 996	1346464. 144663:				NS					
DOCUM 1. Corporation (MENT # P940	000642	92 (3	3)							
	TING EDGE, INC.						4 11011101 110 10111 01011 00111 001	H BANK BANK B		AIR LOIGE (JRY 1881)	
Principal Place of		Mailing Ad-									
1237 HERNANDEZ BLVD. 1237 HERNANDEZ BLVD. ST. AUGUSTINE FL 32084 ST. AUGUSTINE FL 32084							Date Incorporated or Qualified				
							3. Date Incorporated or Qualified 08/29/1994		of Last 1 4/28/1	995	
2. Principal Plac	pe of Business	2a. Mailing	Address				4. FEI Number		_	Applied For	
21		26	Not H sta				59-3263146		\$8.7	Not Applicable 5 Additional	
Suite, Apt. #	, etc.	27	Apt.#, etc.				5. Certificate of Status Desired			Required	
City & State		City & :	State				Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees	
23 Zip	Country	Zip	_	Couri	try		8. This corporation has liability for				
24	25	29		30	-			No No	Annt		
	g. Name and Address of Cur	rrent Registered A	gent		31	Name	10. Name and Address of New I	Registered	Ageni		
LEONE, DIANE P							ress (P.O. Box Number is Not Acceptable)				
1237 HERNANDEZ BLVD.					32	Street Addre	ass (r.o. box number is not Accepta	the)			
	BUSTINE FL 32084			7	83						
				-	84	City	A SAME OF THE SAME	-	85 2	Zip Code	
								FL	•	ragintered office	
or requietors	o the provisions of Sections 607.0 ed agent, or both, in the State of F h, and accept the obligations of, S	Florida, Such chacae	e was author.	zea by the co	e n	iamed corpora oration's boar	ation submits this statement for the pu d of directors. Thereby accept the app	pointment as	registere	agent. Fam	
Tamiliar Will SIGNATURE	n, and accept the obligations or, a	36611041 607 (7303, 1	e an outac	3							
5	Signature, typed or prode that a of registered a	agentia i trontappisates AND DIRECTORS		O't Papalifed a	(Jr. 1	tspatatepen	ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIREC1	ORS IN 12	
12.	N OFFICENS		DELETE		LE		ADDITIONS CHANGES TO OF		Change		
NAME	LEONE, DIANE P	•		1.2 NAI	ve						
STREET ADDRESS	1237 HERNANDEZ BLVD).		. 3 818	k F I	ADDRESS					
CITY-ST-ZIP	ST. AUGUSTINE FL 3208	34		1401	Y - S	T - ZIP				. <u></u>	
TETUE		[] DELETE	2 1 7.1	LF	ļ		'	☐ Change	e ☐ Addition	
NAME				2.2 NA	ΜE						
STREET ADDRESS						ADORESS					
CITY - ST - ZIF			T (VC) ETE	2.4 CH		11 - ZIP			Change	e 🔲 Addition	
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NAME STREET ADDRESS						I ADOPESS					
CITY-ST-ZIP				3 4 01							
TITLE			DELETE	4 1 Tı					☐ Chang	e Addition	
NAME				4 2 NA	ME	-					
STREET ADDRESS				4351	REFT	ADORESS					
CITY-ST-ZIP		·				ST - 21P			Chace	e Addition	
TITLE			DELETE	5 1 14					Chang	, Madical	
NAME				5 2 NA		LIBBOOKS					
STREET ADDRESS						I ADDRESS					
CHY+ST-ZIP			DELETE	5 4 C		ST · ZIP	A STATE OF THE STA		Chang	e 🔲 Addition	
TITLE NAME				62 N					_		
STREET ADDRESS						: ADDRESS					
Janeer Applicad	i			1							

64 CITY-SI-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 (904) 471-7573

CR2E034 (12/95)