

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:23

DOCUMENT # P94000071149 (6)

1. Corporation Name

EDGEWATER VENTURES, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/27/1994

3a. Date of Last Report

2. Principal Place of Business

21 6194 Edgewater Dr.
Suite, Apt. #, etc.

2a. Mailing Address

26 5087 Bernegat Pt. Rd.
Suite, Apt. #, etc.

4. FBI Number

59-3259930

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

22 City & State

23 Orlando, FL

27 City & State

28 Orlando, FL

24 Zip

25 32810

Country

26 USA

29 Zip

30 32808

Country

31 USA

9. Name and Address of Current Registered Agent

BYRD, JAMES S JR.
807 S. ORLANDO AVE., SUITE H
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name

John Barry Tracy

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

5087 Bernegat Pt. Rd.

83

84 City

Orlando

FL

85 Zip Code

32808

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 date of signature

NOTE: Registered Agent signature required when registering

DATE

5-21-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BYRD, JAMES S JR.
STREET ADDRESS	807 S. ORLANDO AVE., SUITE H
CITY, ST, ZIP	WINTER PARK FL 32789
TITLE	D
NAME	KAUFMAN, NORMAN R
STREET ADDRESS	807 S. ORLANDO AVE., SUITE H
CITY, ST, ZIP	WINTER PARK FL 32789
TITLE	D
NAME	KILLION, ARDIE W JR.
STREET ADDRESS	807 S. ORLANDO AVE., SUITE H
CITY, ST, ZIP	WINTER PARK FL 32789
TITLE	D
NAME	TRACY, BARRY
STREET ADDRESS	807 S. ORLANDO AVE., SUITE H
CITY, ST, ZIP	WINTER PARK FL 32789
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	TRACY, Barry	
1.3 STREET ADDRESS	5087 Bernegat Pt. Rd.	
1.4 CITY, ST, ZIP	Orlando, FL 32808	
2.1 TITLE	Vice president	☐ Change ☒ Addition
2.2 NAME	Wendy Tracy	
2.3 STREET ADDRESS	5087 Bernegat Pt. Rd.	
2.4 CITY, ST, ZIP	Orlando, FL 32808	
3.1 TITLE	Vice president	☐ Change ☒ Addition
3.2 NAME	Denna WAGE	
3.3 STREET ADDRESS	2546 Woodland Hills Rd.	
3.4 CITY, ST, ZIP	Blacksburg, VA 24060	
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		

REMITTED BY MAY 1

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 110.07(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

Date

(Signature) (Name)

4-28-95

407-2986418