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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90136 042 ***150.00

DOCUMENT # **P94000071149**1. Corporation Name

EDGEWATER VENTURES, INC.

Principal Place	e of Business	Mailing Address		t todinodi ila ibrit didir darri darri darri darri	700: 1100) (101) 01010 101(100)
6194 EDGEWATER DR 5087 BARNEGAT PT RD					
ORLANDO FL 32810		- ORLANDO FL 32808		DO NOT WOLTE IN THIS	00405
US		US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed	SPACE
				09/27/1994	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 350 E. Kin	95 6 24	59-3259920	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	,)	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State 28 Winter Pa	ch Fl	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 Zip	Country	Zip Zip	Country	Trust Fund Contribution	
		29 32789 30	7 C C	 This corporation owes the current year Interpretation. Personal Property Tax. 	☐ Yes KNo
24	25 9. Name and Address of Curren			10. Name and Address of New Registered	
81 Name					
TRAC	CY, JOHN B		201	hn B 1RACY	
5087 BARNEGAT PT R D			82 Street Add	dress (P.O. Box Number & Not Acceptable)	
ORL	ANDO-FL 32808		83	2 1011193 0011/	
			84 City	Les Poule FL	85 Zip Code
44 Pursuant	to the provisions of Sections 607 050	2 and 607 1508 Florida Statutes	the above-named cor	poration submits this statement for the purpose of	changing its registered
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.					
	m ramiliar with and ascept the obliga	tions of, Section 607.0305, Florida	a Statutes.	4-20-99	J
SIGNATURE	Signature, typed or prived name of registered ager	nt and title if applicable. (NOTE: Re	gistered Agent signature requi	red when reinstating) DATE	
12.	V4	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TRACY, BARRY		1.2 NAME		
STREET ADDRESS	ORLANDO FL Winter	O E. Kings Way	1,3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL Winter	x Park, A. sa789	1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	,		2.2 NAME .		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		ļ
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		Character Character
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME '			6.2 NAME		
STDEET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I 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, with all other like empowered.

SIGNATURE:

NG OFFICER OR DIRECTOR