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Feb 19 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 # P96000006309 (4)

1. Corporation Name

ELECTRONIC DESIGN & DOCUMENTATION, INC.



Principal Place of Business

4831 GROVE POINT DRIVE
TAMPA FL 33624

Mailing Address

4831 GROVE POINT DRIVE
TAMPA FL 33624-5208

3. Date Incorporated or Qualified

01/17/1996

3a. Date of Last Report

1-17-96

2. Principal Place of Business

21 4119 Gunn Highway

Suite, Apt. #, etc.

22 Suite 16

City & State

23 Tampa, Florida

Zip

24 33624

Country

25 USA

2a. Mailing Address

26 4119 Gunn Hwy.

Suite, Apt. #, etc.

27 Suite 16

City & State

28 Tampa, Florida

Zip

29 33624

Country

30 USA

4. FEI Number

65-0638488

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

9. Name and Address of Current Registered Agent

MCHUGH, JAMES R
4831 GROVE POINT DRIVE
TAMPA FL 33624

10. Name and Address of New Registered Agent

81 Name

McHugh, James R.

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

4119 Gunn Hwy

83

Suite 16

84 City

Tampa

FL

85 Zip Code

33624

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: James R. McHugh

James R. McHugh

2/14/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME Ellen M. McHugh
STREET ADDRESS 4831 Grove Pt. Dr.
CITY-ST-ZIP Tampa FL 33624

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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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 President ☒ Change ☐ Addition

1.2 NAME James R. McHugh
1.3 STREET ADDRESS 4119 Gunn Hwy Suite 16
1.4 CITY-ST-ZIP Tampa FL 33624

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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 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: James R. McHugh

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

2/14/97

Date

813-961-2042

Daytime Phone #

CR2E034 (9/96)