

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90022 017 ***150.00

DOCUMENT # P97000069387

1. Entity Name

EDWARDS REAL ESTATE SERVICE COMPANY, INC.

Principal Place of Business

Mailing Address

1431 STEWART BLVD
 CLEARWATER FL 33764

1431 STEWART BLVD
 CLEARWATER FL 33764-2883

2. Principal Place of Business

3. Mailing Address

2561 NURSERY RD

2561 NURSERY RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE B

SUITE B

City & State

City & State

CLEARWATER, FL

CLEARWATER, FL

Zip
 33764

Country

PINELLAS

Zip
 33764

Country

PINELLAS

4. FEI Number

59-3465331

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MIZIO, ARMANDO F
 254 US 19 NORTH
 SUITE 210
 CLEARWATER FL 33763

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PTD Delete
 NAME: EDWARDS, ROBERT J
 STREET ADDRESS: 1431 STEWART BLVD
 CITY-ST-ZIP: CLEARWATER FL 33764

TITLE: PTD Change Addition
 NAME: EDWARDS, ROBERT J.
 STREET ADDRESS: 2561 NURSERY RD - SUITE B
 CITY-ST-ZIP: CLEARWATER, FL 33764

TITLE: VSD Delete
 NAME: EDWARDS, MARGARET R
 STREET ADDRESS: 1431 STEWART BLVD
 CITY-ST-ZIP: CLEARWATER FL 33764

TITLE: VSD Change Addition
 NAME: MARGARET R EDWARDS
 STREET ADDRESS: 2561 NURSERY RD - SUITE B
 CITY-ST-ZIP: CLEARWATER, FL 33764

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
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 STREET ADDRESS:
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TITLE: Change Addition
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TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Margaret R Edwards
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/00
 Date

(727) 530-1789
 Daytime Phone #

CR2E034 (9/99)