

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082797

Entity Name: E.D.A., INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

6535 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 18147  
SARASOTA, FL 34276 US

## New Mailing Address:

FEI Number: 65-0865995

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEPHEN F. VOIGT, P.A.  
2414 BEE RIDGE ROAD  
SARASOTA, FL 34239 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: HAVILL, DENISE M  
Address: 3624 COUNTRY PLACE BLVD.  
City-St-Zip: SARASOTA, FL 342332116

Title: P ( ) Delete  
Name: HAVILL, DAVID E  
Address: 3684 CNTRY PL BLVD  
City-St-Zip: SARASOTA, FL 342332116

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: HAVILL, DENISE M  
Address: 3684 COUNTRY PLACE BLVD.  
City-St-Zip: SARASOTA, FL 342332116

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: HAVILL, ASHLEY M  
Address: 3214 BOUGAINVILLEA STREET  
City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENISE M HAVILL

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date