## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000098154

Entity Name: ELECTRONIC DATA, INC.

FILED Mar 30, 2007 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
2727 ULMERTON ROAD SUITE 210 CLEARWATER, FL 33762					780 CARILLON PARKWAY SUITE 100 ST. PETERSBURG, FL 33716			
Current Mailing Address:					New Mailing Address:			
2727 ULMERTON ROAD SUITE 210 CLEARWATER, FL 33762					780 CARILLON PARKWAY SUITE 100 ST. PETERSBURG, FL 33716			
FEI Number:	59-3607837	FEI Num	ber Applied For()	FEI Num	nber Not Appli	cable ( )	Certifica	ate of Status Desired (X)
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
SEMINOLE  The above in the State	N KEY TRAIL , FL 33776 named entity su of Florida.	US ubmits th	is statement for the pu	rpose of	f changing its	s registered	d office or re	egistered agent, or both,
SIGNATURE: Electronic Signature of Registered Agent Date								
	paign Financing	Trust Fun	d Contribution ( ).	L				Date
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	MAHAZ, RHONDA 2026 IOWA AVEI SAINT PETERSB	NUE NE URG, FL	33703		Title: Name: Address: City-St-Zip:		AVENUE NE ERSBURG, FL	_ 33703
Title: Name: Address: City-St-Zip:	VP () E VICKERY, SEAN 18819 CHAVILLE LUTZ, FL 33558	ROAD			Title: Name: Address: City-St-Zip:		() Change (	( ) Addition
Title: Name: Address: City-St-Zip:	FLYNN, JAMES F 9876 INDIAN KE	( ) Delete YNN, JAMES P ST 76 INDIAN KEY TRAIL MINOLE, FL 33776			Title: Name: Address: City-St-Zip:	ST (X) Change ( ) Addition FLYNN, JAMES P 9876 INDIAN KEY TRAIL SEMINOLE, FL 33776		
Title: Name: Address: City-St-Zip:	()[	Delete			Title: Name: Address: City-St-Zip:	EVP CARRICK, V 31403 PHILI WESLEY CH		` '
Title: Name: Address: City-St-Zip:	1 ( )	Delete			Title: Name: Address: City-St-Zip:	VP CHAUNCEY 7918 CYPRI SARASOTA,	ESS LAKE DF	

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES P. FLYNN ST 03/30/2007