
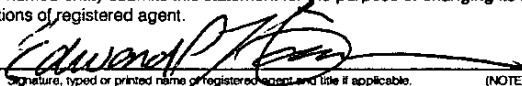
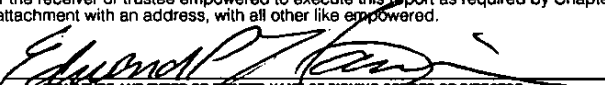


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2005 8:00 am
Secretary of State

08-08-2005 90048 049 ***558.75

DOCUMENT # S04298 1. Entity Name EDWARD P. HARRISON, DESIGNER/BUILDER, INCORPORATED																							
Principal Place of Business 6010 S HWY A1A STE 9 MELBOURNE BEACH, FL 32951 US			Mailing Address 6010 S HWY A1A STE 9 MELBOURNE BEACH, FL 32951 US																				
2. Principal Place of Business 6010 S. Highway A1A Suite, Apt. #, etc.		3. Mailing Address 6010 S. Highway A1A Suite, Apt. #, etc.																					
City & State Melbourne Beach, FL Zip 32951 Country		City & State Melbourne Beach, FL Zip 32951 Country		4. FEI Number 59-3034757																			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																			
6. Name and Address of Current Registered Agent HARRISON, EDWARD P. 5215 S. HWY A1A MELBOURNE, FL 32951			7. Name and Address of New Registered Agent Name Edward P. Harrison Street Address (P.O. Box Number is Not Acceptable) 6010 Highway A1A City Melbourne Beach FL Zip Code 32951																				
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 8/04/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>																							
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																					
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P HARRISON, EDWARD P.</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">5215 S. HWY A1A</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">MELBOURNE BEACH, FL 32951</td> </tr> </table>			TITLE	P HARRISON, EDWARD P.	<input type="checkbox"/> Delete	STREET ADDRESS	5215 S. HWY A1A		CITY-ST-ZIP	MELBOURNE BEACH, FL 32951		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P Edward P. Harrison</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">267 Loggerhead Drive</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">Melbourne Beach, FL 32951</td> </tr> </table>			TITLE	P Edward P. Harrison	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	267 Loggerhead Drive		CITY-ST-ZIP	Melbourne Beach, FL 32951	
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																							
SIGNATURE: 				Date 8/4/05 Daytime Phone # 321-723-6386																			

