2004 FOR PROFIT CORPORATION ANNUAL REPORT

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

Apr 22, 2004 08:00 AM Secretary of State DOCUMENT # S05239 1. Entity Name THE EDGEWATER CORPORATION Principal Place of Business Mailing Address 4460 EDGEWATER DR 4460 EDGEWATER DRIVE ORLANDO, FL 32804 ORLANDO, FL 32604 84122884 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3030820 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ABRAMS, LEHN E. DO NOT WRITE 801 N MAGNOLIA AVE SUITE 201 IN THIS SPACE ORLANDO, FL 32803 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 Signature, typed or printed name of registered agent and title of applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME ABRAMS, LEHN E. STREET ADDRESS 801 N MAGNOLIA AVE U00000125312 22704-80079-019 150.00 ORLANDO, FL CATY-ST-7IP TITLE JACOBS, GENE T. MARKE 4460 EDGEWATER DR STREET ADDRESS CITY-ST-2IP ORLANDO, FL TITLE JACOBS, SUSAN H. NAME STREET ADDRESS 4460 EDGEWATER DR DO NOT WRITE C3TY - ST - 23P ORLANDO, FL THE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP HRE NAME STREET ADDRESS CITY - ST - 78P HILE

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 807, 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.

4120101

elne

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED