## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S05239

4460 EDGEWATER DR

ORLANDO, FL

Address:

City-St-Zip:

Entity Name: THE EDGEWATER CORPORATION

FILED Jun 17, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	EWATER DR ), FL 32804				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	EWATER DRI ), FL 32604	VE US			
FEI Number	: 59-3030820	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of				of New Registered Agent:	
SUITE 201 ORLANDO The above	), FL 32803 L named entity: e of Florida.		urpose of changing its registere	d office or registered agent, or both,	
0.010.01		nic Signature of Registered Age	nt	 Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) ABRAMS, LEHI 801 N MAGNOI ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P ( ) JACOBS, GENI 4460 EDGEWA ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	ST ( ) JACOBS, SUSA	) Delete AN H.	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: SUSAN HANN JACOBS ST 06/17/2009