

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2005 8:00 am
Secretary of State

08-23-2005 90012 046 ***550.00

DOCUMENT # S29001

1. Entity Name
EDGE INFORMATION MANAGEMENT, INC.



Principal Place of Business
**1901 S. HARBOR CITY BLVD.
SUITE 401
MELBOURNE, FL 32901 US**

Mailing Address
**1901 S HARBOR CITY BLVD
STE #400
MELBOURNE, FL 32901 US**

50062976



2. Principal Place of Business
100 Rialto Place

3. Mailing Address
- Same -

Suite, Apt. #, etc.
Suite 800

Suite, Apt. #, etc.

City & State
Melbourne, FL

City & State

Zip
32901

Country
Brevard

Zip

Country

08162005 Chg-P CR2E034 (10/03)

4. FEI Number
59-3051013

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BRACKETT, ROBERT A
1901 S HARBOR CITY BLVD
STE #400
MELBOURNE, FL 32901**

7. Name and Address of New Registered Agent

Name
Brackett, Robert A.

Street Address (P.O. Box Number is Not Acceptable)

2066 14th Avenue #101

City
Vero Beach

FL

Zip Code
32960

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BRACKETT, ROBERT L.
2066 14TH AVENUE
VERO BEACH, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CHAFFIOT, ROBERT R., SR.
8 RIVER RIDGE DR.
ROCKLEDGE, FL** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HANENBURG, DONALD T.
1901 S HARBOR CITY BLVD STE 400
MELBOURNE, FL 32901** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
CHAFFIOT, MARK
9 RIVER RIDGE DRIVE
ROCKLEDGE, FL 32955** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
BRACKETT, ROBERT A.
2066 14TH AVE
VERO BEACH, FL 32960** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Hanenburg, Donald T.
100 Rialto Place, Suite 800
Melbourne, FL 32901** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #