2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V01736

1. Entity Name

EDN CONSULTING, INC.

Principal Place of Business

Mailing Address

18506 S.W. 67TH AVENUE ARCHER FL 32618

2.

18506 S.W. 67TH AVENUE ARCHER FL 32618-2718

Principal Place of Business 3. Mailing Address				_	DO NOT WRITE IN THIS SPACE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		7				
City & State		City & State		4. F	-59-3098632	Applied For Not Applicable		
Zip Country Zip			Country 5.		Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current Re	egistered Agent		7. N	Name and Address of New Registered	Agent		
			Name					
QUINCEY, JAMES S. 111 S,E, 1ST AVENUE GAINESVILLE FL 32601			Street Address (P.O. Box Number is Not Acceptable)					
			City		FL	Zip Code	, .	
8. The above	named entity submits this statement for t		egistered office or regis	<u> </u>				
Tax filing r	pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After MAY 1, 200	FILE NOW!!! FEE IS \$150.00 fter MAY 1, 2000 Fee will be \$550.00 Check Payable to Department of State		10. Election Campaign Financing		D May Be to Fees	
11. OFFICERS AND DIRECTORS			12.	AD	DITIONS/CHANGES TO OFFICERS AN	D DIRECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD NORRIS, ED D. 18506 SW 67TH AVENUE ARCHER FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition ↓	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NORRIS, GLORIA T. 18506 SW 67TH AVENUE ARCHER FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Authority	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
indicated of the cor	I certify that the information supplied with the control of the co	rue and accurate and that my rered to execute this report a	v sianature shali have ti	ne same i	legal effect as if made under oath; that i	am an officer of	or airector	

SIGNATURE: _ ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

May 01, 2000 8:00 am Secretary of State

05-01-2000 90390 013 ***150.00