2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #725652

1. Entity Name
THE EDGEWOOD UNIT THREE ASSOCIATION, INC.



FILED Jan 30, 2006 8:00 am Secretary of State

01-30-2006 90041 018 ****61.25

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22805 SW 66TH AVENUE 2 C/O DONALD BURKE 2			22805 C/O DO	Mailing Address 22805 SW 66TH AVENUE C/O DONALD BURKE BOCA RATON, FL 33428-2919				THE RESIDENCE OF THE PART SHEET HAS BEEN WHEN BEEN WHEN BEEN BEEN BEEN BEEN BEEN BEEN BEEN B						
2. Principal Place of Business 3.			3. Mailing	3. Mailing Address										
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				01082006	Chg	J-NP	(CR2E03	37 (11/05)	
City & State		City & State				4. FEI Numb NOT Af		ABLE			<u> </u>	pplied For lot Applicable		
Zíp		Country	Zip	·	Coun	try		5. Certificate	of Stati	ŭŝ Desire	ed .		\$8.75 Ac Fee Requir	
	6. Name	and Address of Current	Registered	Agent				7. Name and	d Addre	ss of Ne	w Regi	istered /	Agent	
DONALD F	BURKE				- 1	Name								
DONALD BURKE 22805 SW 66 AVE BOCA RATON, FL 33428						Street Addr	ress (F	P.O. Box Numb	oer is No	ot Accept	table)		,	
						City						FL	Zip Co	de
	named entity tions of regist	y submits this statement for tered agent.	or the purpos	e of changing its re	egistered	d office or req	gistere	ed agent, or bo	oth, in th	ie State o	of Florid	la.Iam	familiar with	, and accept
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applica	ible. (NOTE:	Registered /	Agent signature re	equired	when rainstating)				DATE		·
Filing Fee Is \$61.25 Due by May 1, 2006			9. Election Campaign Financing Trust Fund Contribution.			, ,	\$5.00 мау і	Be				k payable		
		iay 1, 2000		Trust Fund Co	ontributio	п. 🗀		Added to Fees	s		Florida	a Depar	tment of	State
10.		OFFICERS AND DI	RECTORS		11.	n. L		Added to Fees						
10. TITLE			RECTORS				Se d	DDITIONS/CH	HANGES	TO OFF	ICERS	AND DI	RECTORS I	
TITLE NAME	D BLAIS, PA	OFFICERS AND DI	RECTORS		11.		Se d	DDITIONS/CH	HANGES	TO OFF	ICERS	AND DI	RECTORS I	N 10
TITLE NAME STREET ADDRESS	D BLAIS, PA 22805 S.V	OFFICERS AND DIE AUL A. N. 66TH AVENUE	RECTORS		11. TITLE NAME STREET		Se d	DDITIONS/CH	HANGES	TO OFF	ICERS	AND DI	RECTORS I	N 10
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D BLAIS, PA 22805 S.V BOCA RA S CUMMING	OFFICERS AND DIE AUL A. M. 66TH AVENUE ITON, FL GS, MARY ROSE	RECTORS	☐ Delete	11. TITLE NAME STREET CITY-S TITLE NAME	ADDRESS ST-ZIP	SEC 230	DDITIONS/CH CREARY 154 GC 50.5 S CCA PA	HANGES OLDI JW HTON	79 N 664h 1-6	Au	AND DI	RECTORS I	N 10 Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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:

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The statutes in the information indicated on this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address.

SI	IGI	N	A٦	ΓIJ	R	E

561-455-3164 Daytime Phone #