2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03489

FILED Jan 07, 2004 Secretary of State

Entity Name: 2087 EDGEWATER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: 2087 EDGEWATER DR., APT C APT G			New Principal Place of Business:
2087 EDGEWATER DR., APT C APT G			2087 EDGEWATER DR., APT G
CLEARWATER, FL 33755			CLEARWATER, FL 33755
Current Mailing Address: 2087 EDGEWATER DR., APT C			New Mailing Address:
2087 EDGEWATER DR., APT C APT G CLEARWATER, FL 33755			2087 EDGEWATER DR., APT G CLEARWATER, FL 33755
	59-2891532	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of (Current Registered Agent:	Name and Address of New Registered Agent:
WILKINSON, JOHN 2087 EDGEWATER DRIVE APT H			MENSCH, ROBERT 2087 EDGEWATER DRIVE APT G
CLEARWATER, FL 33755			CLEARWATER, FL 33755
		submits this statement for the	purpose of changing its registered office or registered agent, or both
in the State of Florida. SIGNATURE: ROBERT MENSCH			01/07/2004
	Electro	nic Signature of Registered Ac	ent Date
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	GARRISON, JO	ATER DR., APT E	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	WILKINSON, J	ATER DRIVE APT H	Title: PD (X) Change () Addition Name: RIVERA, GLEN Address: 2087 EDGEWATER DRIVE APT D City-St-Zip: CLEARWATER, FL 33755
Title: Name: Address: City-St-Zip:	ROBERT, MEN	ATER DR APT G	Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT MENSCH TD 01/07/2004