2007 NOT-FOR-PROFIT CORPORATION

May 03, 2007 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # N28901 05-03-2007 90055 025 ****61.25 1. Entity Name EDGEWATER COVE SECTION 4 ASSOCIATION, INC. QUAY" Principal Place of Business Mailing Address P.O. BOX 916 P.O. BOX 916 BRADENTON, FL 34206 BRADENTON, FL 34206 04252007 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0106210 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARCUS, DIANE S DO NOT WRITE 2233 11TH AVE W BRADENTON, FL 34206 IN THIS SPACE 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) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2007 OFFICERS AND DIRECTORS 10. TITLE DP NAME OTLEY, ROGER STREET ADDRESS 1259 EDGEWATER CIRCLE CITY-ST-ZIP BRADENTON, FL 34209 TITLE DVP COBB, ROGER NAME STREET ADDRESS 1267 EDGEWATER CIRCLE CITY-ST-ZIP BRADENTON, FL 34209 TITLE NAME VILLA, LILO STREET ADDRESS 1251 EDGEWATER CIRCLE DO NOT WRITE CITY+ST-ZIP BRADENTON, FL 34209 IN THIS SPACE TITLE DS BRAY, PENNY STREET ADDRESS 1269 EDGEWATER CIR CITY-ST-ZIP BRADENTON, FL 34209 TITLE NAME RECTOR, WALTER STREET ADDRESS 1293 EDGEWATER CIRCLE CITY-ST-ZIP BRADENTON, FL 34209

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

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

Walter T. Rector

4/26/07

941-746-4998

FILED

Oavtime Phone #