


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # N93000002772

1. Entity Name
EDGEWATER HOMEOWNER'S ASSOCIATION AND NEIGHBORHOOD WATCH, INC.



Principal Place of Business 318 FRISCO RD PENSACOLA, FL 32507	Mailing Address 318 FRISCO RD PENSACOLA, FL 32507
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DO NOT WRITE IN THIS SPACE



04052008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3190200	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WILLIAMS, JAUNITA
 318 FRISCO RD
 PENSACOLA, FL 32507**

DO NOT WRITE 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: *JAUNITA WILLIAMS, President Jaunita Williams* 4-21-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
 Due by May 1, 2008**

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	DP WILLIAMS, JAUNITA 318 FRISCO RD PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HORTON, FRANCES 504 CHASEVILLE ST PENSACOLA, FL 32507
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CHESTNUT, JUDITH A 503 FRISCO RD PENSACOLA, FL 32507
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/13/08-80046-007 61.25

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: *JAUNITA WILLIAMS - President Jaunita Williams* 4-21-08 850-455-6993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #