

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 02, 2005
Secretary of State**

DOCUMENT# N96000005534

Entity Name: EDGEWATER ACRES ROADWAY ASSOCIATION, INC.

Current Principal Place of Business:

3280 68TH ST SW
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

3280 68TH ST SW
NAPLES, FL 34105

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANNING, JOSEPH M
3280 68TH ST SW
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MANNING, JOSEPH M
Address: 3280 68TH ST SW
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: MANNING, BETH A
Address: 3280 68TH ST SW
City-St-Zip: NAPLES, FL 34105

Title: D () Delete
Name: MANNING, KELLY M
Address: 3280 68TH ST SW
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH M. MANNING

PSTD

02/02/2005

Electronic Signature of Signing Officer or Director

_____ Date