

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002439

FILED
Jul 22, 2007
Secretary of State

Entity Name: EDISON PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

2548 COLUMBUS
FORT MYERS, FL 33901 US

New Principal Place of Business:

Current Mailing Address:

2548 COLUMBUS
FORT MYERS, FL 33901 US

New Mailing Address:

FEI Number: 65-0991391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WITHROW, ANNA
2541 COLOMBUS
FORT MYERS, FL 33901 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: VP () Delete
Name: MCLEAN, CRAIG
Address: 2416 EUCLID AVE
City-St-Zip: FORT MYERS, FL 33901 US

Title: P () Delete
Name: WITHROW, ANNA
Address: 2548 COLOMBUS
City-St-Zip: FORT MYERS, FL 33901

Title: S () Delete
Name: GORDON, KIRKE
Address: 1668 MENLO RD
City-St-Zip: FORT MYERS, FL 33901

Title: T () Delete
Name: GORDON, KIRKE
Address: 1668 MENLO ROAD
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: RYAN, JOYCE
Address: 1751 WOODLAWN AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: CORCORAN, GAYLE
Address: 1668 MENLO ROAD
City-St-Zip: FORT MYERS, FL 33901

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:

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 exemption stated 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 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: ANNA WITHROW

P

07/22/2007

Electronic Signature of Signing Officer or Director

_____ Date