

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002160

**FILED**  
**Feb 19, 2020**  
**Secretary of State**  
**4144280322CC**

**Entity Name:** EDGEWATER AT SUNBEAM CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

240 CANAL BLVD. STE. 2  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

5455 A1A SOUTH  
ST. AUGUSTINE, FL 32080 US

**FEI Number:** 20-2453360

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MAY MANAGEMENT SERVICES, INC.  
5455 A1A SOUTH  
ST. AUGUSTINE, FL 32080 US

*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

**Officer/Director Detail :**

Title           TREASURER  
Name           MAYHEW, BARBARA  
Address        5455 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

Title           SECRETARY  
Name           NEWTON, PHYLLIS  
Address        5455 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

Title           DIRECTOR  
Name           STOVER, ROBERT  
Address        5455 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

Title           VP  
Name           CHAMBERLAIN, ROBERT  
Address        5455 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

Title           PRESIDENT  
Name           LYSINGER, HARRY  
Address        5455 A1A SOUTH  
City-State-Zip: ST. AUGUSTINE FL 32080

*I hereby 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 all other like empowered.*

**SIGNATURE: ROBERT CHAMBERLAIN**

**VICE PRESIDENT**

**02/19/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date