

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N05000002160

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

**Current Principal Place of Business:**

7400 BAYMEADOWS WAY E, SUITE 317  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7400 BAYMEADOWS WAY E, SUITE 317  
JACKSONVILLE, FL 32256

**FEI Number:** 20-2453360

**Certificate of Status Desired:** No

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

COMMUNITY MANAGEMENT CONCEPTS OF JACKSONVILLE INC.  
7400 BAYMEADOWS WAY STE 317  
JACKSONVILLE, FL 32256 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:** NICHOLAS LAMBIASE

08/01/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MERRITT, DAVID M  
Address 7400 BAYMEADOWS WAY, SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title SECRETARY  
Name FRANK, PRAGER  
Address 7400 BAYMEADOWS WAY, SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title PRESIDENT  
Name FAUTH, JILL  
Address 7400 BAYMEADOWS WAY E, SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER  
Name CHAMBERLAIN, ROBERT  
Address 7400 BAYMEADOWS WAY SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

Title VP  
Name LAWSON, MICHAEL  
Address 7400 BAYMEADOWS WAY E, SUITE 317  
City-State-Zip: JACKSONVILLE FL 32256

*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:** JILL FAUTH

PRESIDENT

08/01/2016

Electronic Signature of Signing Officer/Director Detail

Date