

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

DOCUMENT# N07000002518

**Entity Name:** THE EDGE CONDOMINIUM NO. ONE ASSOCIATION, INC.**Current Principal Place of Business:**300 SOUTH AUSTRALIAN AVENUE  
MANAGEMENT OFFICE #100  
WEST PALM BEACH, FL 33401**Current Mailing Address:**300 SOUTH AUSTRALIAN AVENUE  
MANAGEMENT OFFICE #100  
WEST PALM BEACH, FL 33401 US**FEI Number:** 20-8632485**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FIRST SERVICE RESIDENTIAL  
300 SOUTH AUSTRALIAN AVENUE  
MANAGEMENT OFFICE #100  
WEST PALM BEACH, FL 33401 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:** GABRIELLE LEARY

01/11/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name PATEL, RAJ  
Address 300 SOUTH AUSTRALIAN AVENUE  
UNIT 1020  
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR  
Name KENNEDY, GILLES  
Address 2117 BELCARA CT  
City-State-Zip: WEST PALM BEACH FL 33411

Title PRESIDENT  
Name DONOGHUE, JOHN D  
Address 300 SOUTH AUSTRALIAN AVE, UNIT  
322  
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY  
Name TOMMASINO, JOYCE  
Address 6964 HOULTON CIR  
City-State-Zip: LAKE WORTH FL 33467  
  
Title TREASURER  
Name FORGIONE, ANTHONY  
Address 300 S AUSTRALIAN AVE  
UNIT 219  
City-State-Zip: WEST PALM BEACH FL 33401

*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:** JOHN DONOGHUE

PRESIDENT

01/11/2016

Electronic Signature of Signing Officer/Director Detail

Date