## 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# N07000002518

Entity Name: THE EDGE CONDOMINIUM NO. ONE ASSOCIATION, INC.

**FILED** Jun 03, 2016 **Secretary of State** CC6044978077

## **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:

SACHS SAX CAPLAN 6111 BROKEN SOUND PARKWAY NW SUITE 200 BOCA RATON, FL 33487 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: SAX CAPLAN 06/03/2016

Title

**SECRETARY** 

Electronic Signature of Registered Agent

Officer/Director Detail:

Address

City-State-Zip:

Title VΡ Title **TREASURER** 

Name PATEL, RAJ Name TOMMASINO, JOYCE 6964 HOULTON CIR Address

300 SOUTH AUSTRALIAN AVENUE Address **UNIT 1020** 

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: WEST PALM BEACH FL 33401

Title **DIRECTOR** FORGIONE, ANTHONY Name

Name RAIGOSA, HECTOR Address 300 S AUSTRALIAN AVE

300 SOUTH AUSTRALIAN AVE, UNIT **UNIT 219** 

1005 WEST PALM BEACH FL 33401 City-State-Zip:

Title **PRESIDENT** 

WEST PALM BEACH FL 33401

DONOGHUE, JOHN D Name

300 SOUTH AUSTRALIAN AVE, UNIT Address

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.

06/03/2016 SIGNATURE: JOYCE TOMMASINO **LCAM** 

Date