

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003947

Entity Name: WATERS EDGE AT EDGEWATER HOMEOWNERS ASSOCIATION
INC.**FILED**
Mar 04, 2022
Secretary of State
9719076332CC**Current Principal Place of Business:**HIGH 4 MANAGMENT
4516 HIGHWAY 20 E #102
NICEVILLE, FL 32578**Current Mailing Address:**HIGH 4 MANAGEMNT
PO BOX 1223
NICEVILLE, FL 32588 US**FEI Number: 81-2499632****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROBERTS, JAY ESQ.
C/O JENNA CLABEAUX/ BECKER
348 MIRACLE STRIP PARKWAY SW SUITE 7
FORTY WALTON BEACH FL 32548 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: JAY ROBERTS****03/04/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** TREASURER
Name EDWARDS, MICHAEL
Address HIGH 4 MANAGEMNT
PO BOX 1223
City-State-Zip: NICEVILLE FL 32588**Title** DIRECTOR
Name ILGENFRITZ, DAVID
Address HIGH 4 MANAGEMNT
PO BOX 1223
City-State-Zip: NICEVILLE FL 32588**Title** DIRECTOR
Name TURINIER, JOSH
Address HIGH 4 MANAGEMNT
PO BOX 1223
City-State-Zip: NICEVILLE FL 32588**Title** VP
Name MAGWOOD, RON
Address HIGH 4 MANAGEMNT
PO BOX 1223
City-State-Zip: NICEVILLE FL 32588**Title** PRESIDENT
Name PEARSON, KAREN
Address HIGH 4 MANAGEMNT
PO BOX 1223
City-State-Zip: NICEVILLE FL 32588**Title** ASSOCIATION MANAGER
Name HIGH, TONI
Address HIGH 4 MANAGEMNT
PO BOX 1223
City-State-Zip: NICEVILLE FL 32588

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: TONI HIGH**CAM****03/04/2022**

Electronic Signature of Signing Officer/Director Detail

Date