2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003947

Entity Name: WATERS EDGE AT EDGEWATER HOMEOWNERS

ASSOCIATION INC.

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. 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 04/30/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title VP

Name EDWARDS, MICHAEL Name MAGWOOD, RON

Address HIGH 4 MANAGEMNT Address HIGH 4 MANAGEMNT

PO BOX 1223 PO BOX 1223

City-State-Zip: NICEVILLE FL 32588 City-State-Zip: NICEVILLE FL 32588

Title TREASURER Title DIRECTOR

Name ILGENFRITZ, DAVID Name PEARSON, KAREN

Address HIGH 4 MANAGEMNT Address HIGH 4 MANAGEMNT

PO BOX 1223 PO BOX 1223

City-State-Zip: NICEVILLE FL 32588 City-State-Zip: NICEVILLE FL 32588

Title PRESIDENT Title ASSOCIATION MANAGER

Name TURINIER, JOSH Name HIGH, TONI

Address HIGH 4 MANAGEMNT Address HIGH 4 MANAGEMNT

PO BOX 1223 PO BOX 1223

City-State-Zip: NICEVILLE FL 32588 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 MANAGER 04/30/2024

FILED Apr 30, 2024

Secretary of State

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