

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N16000007683

**Entity Name:** EDGEWATER WALK II ON HARBOUR ISLE, A CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

4042 PARK OAKS BLVD., STE. 450  
TAMPA, FL 33610

**Current Mailing Address:**

4042 PARK OAKS BLVD., STE. 450  
TAMPA, FL 33610 US

**FEI Number: 81-3609847**

**Certificate of Status Desired: No**

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

BRICKLEMYER LAW GROUP, P.L.  
1304 S. DESOTO AVENUE, STE. 304  
TAMPA, FL 33606 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            CALE, BRIAN  
Address        4042 PARK OAKS BLVD., STE. 450  
City-State-Zip: TAMPA FL 33610

Title            VP  
Name            DAMBROSE, SCOTT  
Address        4042 PARK OAKS BLVD., STE. 450  
City-State-Zip: TAMPA FL 33610

Title            SECRETARY, TREASURER  
Name            CONNOLLY, LARA  
Address        4042 PARK OAKS BLVD., STE. 450  
City-State-Zip: TAMPA FL 33610

*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: BRIAN CALE**

**PRESIDENT**

**07/06/2017**

Electronic Signature of Signing Officer/Director Detail

Date