

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28901

Entity Name: EDGEWATER COVE SECTION 4 ASSOCIATION, INC.**Current Principal Place of Business:**1271 EDGEWATER CIRCLE
BRADENTON, FL 34209**Current Mailing Address:**GULF COAST ASSOCIATION MANAGEMENT LLC
PO BOX 14663
BRADENTON, FL 34280 US**FEI Number:** 65-0106210**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GULF COAST ASSOCIATION MANGEMENT
GULF COAST ASSOCIATION MANAGEMENT
4410 FAIRWAYS BLVD 407
BRADENTON, FL 34209 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:** MOLLY TREWORGY

03/06/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, PRESIDENT
Name PEREDY, GEORGE
Address 1271 EDGEWATER CIRCLE
City-State-Zip: BRADENTON FL 34209

Title DIRECTOR, VP
Name PEACOCK, LEE
Address 1275 EDGEWATER CIRCLE
City-State-Zip: BRADENTON FL 34209

Title DIRECTOR, TREASURER
Name NAVIAUX, ROBERT
Address 1295 EDGEWATER CIRCLE
City-State-Zip: BRADENTON FL 34209

Title DIRECTOR, SECRETARY
Name CLAEYS, BRIAN
Address 1279 EDGEWATER CIRCLE
City-State-Zip: BRADENTON FL 34209

Title DIRECTOR
Name LISLE, SHERRILL
Address 1251 EDGEWATER CIRCLE
City-State-Zip: BRADENTON FL 34209

Title MANAGER
Name TREWORGY, MOLLY
Address GULF COAST ASSOCIATION
MANAGEMENT LLC
PO BOX 14663
City-State-Zip: BRADENTON FL 34280

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: MOLLY TREWORGY

MANAGER

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date