

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N43846

**Entity Name:** EDGEWOOD VILLAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

679 LAKE HARBOR CR  
EDGEWOOD, FL 32809

**Current Mailing Address:**

P.O. BOX 592675  
ORLANDO, FL 32859

**FEI Number:** 59-3153281

**Certificate of Status Desired:** No

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

POZO, JOSEPH  
679 LAKE HARBOR CR  
EDGEWOOD, FL 32809 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	PD	Title	VD
Name	SCHROEDER, PETER	Name	REULE, TED
Address	673 LAKE HARBOR CR	Address	637 LAKE HARBOR CR
City-State-Zip:	EDGEWOOD FL 32809	City-State-Zip:	EDGEWOOD FL 32809
Title	STD		
Name	HARRELL JONES, YOLANDA		
Address	660 LAKE HARBOR CIRCLE		
City-State-Zip:	EDGEWOOD FL 32809		

*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:** PETER SCHROEDER

PD

01/28/2013

Electronic Signature of Signing Officer/Director Detail

Date