

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002439

Entity Name: EDISON PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1669 ARDMORE RD
FORT MYERS, FL 33901

Current Mailing Address:

1669 ARDMORE RD
FORT MYERS, FL 33901 US

FEI Number: 65-0991391

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHIPPAS, NANCY ELLEN TREASURER
1669 ARDMORE RD
FORT MYERS, FL 33901 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: NANCY ELLEN SHIPPAS

02/03/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BALOGH, FRANK
Address 1639 LLEWELLYN DRIVE
City-State-Zip: FORT MYERS FL 33901

Title TRES
Name SHIPPAS, NANCY ELLEN
Address 1669 ARDMORE RD
City-State-Zip: FORT MYERS FL 33901

Title SECRETARY
Name GAIDE, KIM
Address 1778 WOODLAWN AVE
City-State-Zip: FORT MYERS FL 33901

Title CO-PRESIDENT
Name BELCHER, STEVE
Address 1766 MARLYN ROAD
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name ALBIAR, CRYSTAL
Address 1657 ARDMORE ROAD
City-State-Zip: FORT MYERS FL 33901

Title CO-PRESIDENT
Name O'MAILIA, CHERYL
Address 1806 MONTA VISTA STREET
City-State-Zip: FORT MYERS FL 33901

Title VICE PRESIDENT
Name BOOTHBY, PAGE
Address 1662 MARLYN ROAD
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name CONNERS, CINDY
Address 2464 EUCLID AVENUE
City-State-Zip: FORT MYERS FL 33901

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: NANCY ELLEN SHIPPAS

TREASURER

02/03/2020

Electronic Signature of Signing Officer/Director Detail

Date