

**2016 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:** No

**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

04/15/2016

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 PRESIDENT  
Name BOCHETTE, LISTON  
Address 1632 LLEWELLYN DR  
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR  
Name MCLEAN, CRAIG  
Address 2416 EUCLID AVE  
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

TREASUER

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date