

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90023 007 ***150.00

DOCUMENT # 301242 1. Entity Name THE EDGEWATER HOUSE CORPORATION					
Principal Place of Business 2720 SOUTH OCEAN BLVD PALM BEACH, FL 33480			Mailing Address 2720 SOUTH OCEAN BLVD PALM BEACH, FL 33480		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-1163184	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SHIR, GUY M ESQ 500 AUSTRALIAN AVENUE SOUTH, 9TH FLOOR WEST PALM BEACH, FL 33401				7. Name and Address of New Registered Agent Name Peter C. Mollengarden, Esq. Street Address (P.O. Box Number is Not Acceptable) Becker & Pollakoff, P.A. 625 N. Flagler Drive, 7th Floor West Palm Beach FL 33401	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: Peter C. Mollengarden 3/27/07 (Signature, typed or printed name of registered agent and file if applicable. (NOTED: Registered Agent signature required when resigning.) DATE)					
FILE NOW!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Test Fund Contribution. ☐ \$5.00 May Be Added to Fee		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSTON, KIMBERLY ☒ Delete 2720 S OCEAN BLVD., APT. 325 PALM BEACH, FL 33480		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARY PERRON ☒ Change ☐ Addition 2720 S OCEAN BLVD., APT. 216 PALM BEACH, FL 33480	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT ☒ Delete KUZARA, ROBERT 2720 S. OCEAN BLVD., APT 218 PALM BEACH, FL 33480		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARVIN WEISENFELD ☒ Change ☐ Addition 2720 S. OCEAN BLVD., APT 118 PALM BEACH, FL 33480	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ☒ Delete BIGELOW, DWAYNE 2720 S. OCEAN BLVD., APT 223 PALM BEACH, FL 33480		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRC ☐ Change ☐ Addition KATHY WILL 2720 S. OCEAN BLVD., APT 113 PALM BEACH, FL 33480	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RC ☒ Delete PERLMAN, RHODA 2720 S. OCEAN BLVD., APT 220 PALM BEACH, FL 33480		TITLE NAME STREET ADDRESS CITY-ST-ZIP	STANLEY ☐ Change ☐ Addition ARNOLD WINTER 124 2720 S. OCEAN BLVD., APT PALM BEACH, FL 33480	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM ☐ Delete KRAFT, MEL 2720 S. OCEAN BLVD., APT 124 PALM BEACH, FL 33480		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: MARVIN WEISENFELD VP SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			3/30/07 561-586-8928 Date Daytime Phone #		

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