

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707048

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** 73 EDGEWATER DRIVE CONDOMINIUM INC

**Current Principal Place of Business:**

73 EDGEWATER DR #2  
SUITE 2  
CORAL GABLES, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

73 EDGEWATER DR #2  
SUITE 2  
CORAL GABLES, FL 33133 US

**New Mailing Address:**

**FEI Number:** 65-0267752

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORETZ, ARLENE T  
73 EDGEWATER DR #2  
SUITE 2  
CORAL GABLES, FL 33133 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BANKO, CONNIE  
Address: 73 EDGEWATER DR #4  
City-St-Zip: CORAL GABLES, FL 33133

Title: T  
Name: MORETZ, ARLENE MORETZ  
Address: 73 EDGEWATER DR #2  
City-St-Zip: CORAL GABLES, FL 33133

Title: S  
Name: RIVERA, LESLIE  
Address: 73 EDGEWATER DR #1  
City-St-Zip: CORAL GABLES, FL 33133

Title: VPD  
Name: VALENTA, VIRGINIA  
Address: 73 EDGEWATER DR #3  
City-St-Zip: CORAL GABLES, FL 33133

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: ARLENE M MORETZ

T

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date