

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712156

FILED
Mar 06, 2012
Secretary of State

Entity Name: EDGEWATER EAST CONDOMINIUM APARTMENTS II, INC.

Current Principal Place of Business:

6855 EDGEWATER DR.
CORAL GABLES, FL 33133

New Principal Place of Business:

Current Mailing Address:

C/O C.P.M.CORPORATION
1801 CORAL WAY, STE. 305
MIAMI, FL 33145

New Mailing Address:

FEI Number: 59-2219524 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COHEN, ALBERTO
CERTIFIED PROPERTY MANAGEMENT
1801 CORAL WAY, STE. 305
MIAMI, FL 33145 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: TD
Name: ELSON, STEVEN P
Address: 7260 S.W. 116TH STREET
City-St-Zip: PINECREST, FL 33156

Title: PD
Name: PADRON, JAMES
Address: 5440 SW 87 STREET
City-St-Zip: MIAMI, FL 33143

Title: D
Name: ETTMAN, RITA
Address: 6855 E. EDGEWATER DR
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: VEGA, FEDERICO
Address: 6855 E. EDGEWATER DR
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: PRITCHARD, DAVID
Address: 6855 E. EDGEWATER DR
City-St-Zip: CORAL GABLES, FL 33134

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: ALBERTO COHEN

RA

03/06/2012

Electronic Signature of Signing Officer or Director

Date