2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725517

FILED Apr 04, 2009 Secretary of State

Entity Name: THE EDGEWOOD UNIT EIGHT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

22765 SW 66 AVE 22765 SW 66 AVE

BOCA RATON, FL 33428 107

BOCA RATON, FL 33428

Current Mailing Address: New Mailing Address:

22765 SW 66 AVE 22765 SW 66 AVE

BOCA RATON, FL 33428

BOCA RATON, FL 33428

FEI Number: 23-7405709 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DESTEPHONO, RALPH

22765 SW 66 AVE

22745 SW 66 AVE

#101 204

BOCA RATON, FL 33428 US BOCA RATON, FL 33428 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.

City-St-Zip:

SIGNATURE: JOYCE CASTANEDA 04/04/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: PD (X) Change () Addition

 Name:
 VELLA, FRANK J
 Name:
 SHEARER, CARMELA

 Address:
 22765 S.W. 66 AVENUE
 Address:
 22765 SW 66 AVE # 107

 City-St-Zip:
 BOCA RATON, FL
 33428

Title: T () Delete Title: T (X) Change () Addition

 Name:
 PERLONGO, CATHERINE
 Name:
 PERLONGO, CATHERINE

 Address:
 22765 SW 66 AVE
 Address:
 22765 SW 66 AVE # 205

 City-St-Zip:
 BOCA RATON, FL
 City-St-Zip:
 BOCA RATON, FL
 33428

 $\label{eq:title: VP (X) Change () Addition} \begin{tabular}{ll} Title: & VP & (X) Change () Addition \\ \end{tabular}$

 Name:
 HUMBERTO, BARRIOS
 Name:
 HUMBERTO, BARRIOS

 Address:
 22765 SW 66 AVE.
 Address:
 22765 SW 66 AVE # 202

 City-St-Zip:
 BOCA RATON, FL
 City-St-Zip:
 BOCA RATON, FL 33428

Title: S () Delete Title: S (X) Change () Addition Name: SHURA, ROSEANNE Name: MORETTI-SCHWAB, ROSEANNE Address: 22765 SW 67H AVE Address: 22765 SW 66 AVE# 204

City-St-Zip: BOCA RATON, FL City-St-Zip: BOCA RATON, FL 33428

 Title:
 M
 (X) Delete
 Title:
 () Change () Addition

 Name:
 MOTTO, AUEDINO
 Name:

 Address:
 22765 SW 64 AVE
 Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JOYCE CASTANEDA RA 04/04/2009