## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 728477**

Apr 24, 2008 Secretary of State

Entity Name: EDGEWATER MANOR ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 23188 FREEDOM AVENUE CHARLOTTE HARBOR, FL 33980 **Current Mailing Address: New Mailing Address:** 23188 FREEDOM AVENUE CHARLOTTE HARBOR, FL 33980 FEI Number: 59-1831066 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: GERACE, CATHERINE 23188 FREEDOM AVE CHARLOTTE HARBOR, FL 33980 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MILONE, AL LOWTHER, ROBERT E Name: Name: 223333 EDGEWATER DR., B8 Address: 223333 EDGEWATER DR., C3 Address: City-St-Zip: CHARLOTTE HARBOR, FL 33950 City-St-Zip: CHARLOTTE HARBOR, FL 33980 Title: () Delete Title: (X) Change ( ) Addition WILLIAMS, JEAN Name: MILONE, AL Name: Address: 22333 EDGEWATER DR D-5 Address: 33 DALE ST. City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip: EAST HAVEN, CT 06513 Title: () Delete Title: (X) Change ( ) Addition BROOM, JIM BROOM, JIM Name: Name: 22333 EDGEWATER DR B-5 Address: Address: 22333 EDGEWATER DR B-5 City-St-Zip: CHARLOTTE HARBOR, FL 33980 City-St-Zip: CHARLOTTE HARBOR, FL 33980 Title: ( ) Delete Title: (X) Change ( ) Addition Name: LOWLHER, ROBERT Name: CUMLER, BILL Address: 22333 EDGEWATER DR. C-3 Address: 3038 38TH ST.N.W. City-St-Zip: CHARLOTTE HARBOR, FL 33980 City-St-Zip: CANTON, OH 44718 29 Title: () Delete Title: () Change () Addition BUKOVITZ, CATHERINE Name: Name: 2833 EDGEWATER DR E-1 Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33980 City-St-Zip:

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.

SIGNATURE: ROBERT E. LOWTHER Ρ 04/24/2008