

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728477

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: EDGEWATER MANOR ASSOCIATION, INC.

**Current Principal Place of Business:**

23188 FREEDOM AVENUE  
CHARLOTTE HARBOR, FL 33980

**New Principal Place of Business:**

**Current Mailing Address:**

23188 FREEDOM AVENUE  
CHARLOTTE HARBOR, FL 33980

**New Mailing Address:**

FEI Number: 59-1831066      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GERACE, CATHERINE  
23188 FREEDOM AVE  
CHARLOTTE HARBOR, FL 33980      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: P      ( ) Delete  
Name: LOWTHER, ROBERT E  
Address: 22333 EDGEWATER DR., C3  
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: T      ( ) Delete  
Name: MILONE, AL  
Address: 33 DALE ST.  
City-St-Zip: EAST HAVEN, CT 06513

Title: VP      ( ) Delete  
Name: BROOM, JIM  
Address: 22333 EDGEWATER DR B-5  
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: D      ( ) Delete  
Name: CUMLER, BILL  
Address: 3038 38TH ST.N.W.  
City-St-Zip: CANTON, OH 44718 29

Title: S      ( ) Delete  
Name: BUKOVITZ, CATHERINE  
Address: 2833 EDGEWATER DR E-1  
City-St-Zip: PORT CHARLOTTE, FL 33980

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: LOWTHER, ROBERT E  
Address: PO BOX 364  
City-St-Zip: WATERFORD, NY 12188

Title: T      (X) Change ( ) Addition  
Name: CUMLER, BILL  
Address: 3038 38TH STREET NW  
City-St-Zip: CANTON, OH 44718

Title: VP      (X) Change ( ) Addition  
Name: BROOM, JIM  
Address: 22333 EDGEWATER DR D-1  
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: D      (X) Change ( ) Addition  
Name: WILLIAMS, JEAN  
Address: 50275 W, LAKE SHORE DRIVE  
City-St-Zip: DOWAGIAC, MI 49047 29

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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

P

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date