

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90125 022 ****61.25

0062317

DOCUMENT # 730037

1. Corporation Name

EDGEWATER VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

22375 EDGEWATER DR.
P.O. BOX 260
PUNTA GORDA FL 33980

Mailing Address

22375 EDGEWATER DR.
P.O. BOX 260
PUNTA GORDA FL 33980



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

06/24/1974

4. FEI Number

59-1683333

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MR. DAVID HOLMES
115 WEST OLYMPIA AVE
PO BOX DRAWER 1447
PUNTA GORDA FL 33951

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE

NAME **PAYTI, SARAH**
STREET ADDRESS **22375 EDGEWATER DRIVE UNIT 22375**
CITY-ST-ZIP **PORT CHARLOTTE FL**

TITLE **D** ☐ DELETE

NAME **CHEPURNY, ALEX**
STREET ADDRESS **P.O. BOX 311 HOLLAND LANDING**
CITY-ST-ZIP **ONTARIO, CA**

TITLE **T** ☐ DELETE

NAME **MRS. SANDRA R. MUIRHEAD**
STREET ADDRESS **BOX 540 WATERDOWN N/A**
CITY-ST-ZIP **ONTARIO, CANADA L0R2H0**

TITLE **D** ☐ DELETE

NAME **ERWIN, JIM**
STREET ADDRESS **998 JOHN ST**
CITY-ST-ZIP **DUNNVILLE ON N1A2R**

TITLE **P** ☒ DELETE

NAME **ATKINSON, GARY**
STREET ADDRESS **NEWMARKET STREET BOX 64**
CITY-ST-ZIP **HOLLAND LANDING ON**

TITLE **D** ☐ DELETE

NAME **KENNY, JAY**
STREET ADDRESS **440 LATHROP**
CITY-ST-ZIP **ALGONA MO**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME **FRANCO, LOU**
1.3 STREET ADDRESS **114 DELMAR DR. HAMILTON**
1.4 CITY-ST-ZIP **ONTARIO CANADA L9C 1J9**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME **MRS SANDRA R. MUIRHEAD**
3.3 STREET ADDRESS **BOX 540**
3.4 CITY-ST-ZIP **WATERDOWN ONTARIO CANADA L0R2H0**

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **IRWIN, JIM**
4.3 STREET ADDRESS **998 JOHN ST**
4.4 CITY-ST-ZIP **DUNNVILLE ONTARIO CANADA N1A2R**

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME **CUSHFORD, BILL**
5.3 STREET ADDRESS **34408 W 9 MILE**
5.4 CITY-ST-ZIP **FARMINGTON HILLS MI 48335**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)