

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90700 005 ****61.25

DOCUMENT # 749222

1. Entity Name

EDGEWATER HOUSE CONDOMINIUM ASSOCIATION, INC



Principal Place of Business

**501 S.E. 6TH AVENUE
FT. LAUDERDALE FL 33301
US**

Mailing Address

**501 S.E. 6TH AVENUE
FT. LAUDERDALE FL 33301
US**

20000130



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2072951**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REITER, RICHARD

501 SE 6TH AVE. #101

FT. LAUDERDALE FL 33301

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/8/03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	REITER, RICHARD	
STREET ADDRESS	501 SE 6TH AVE 101	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BOYD, DARRYL	
STREET ADDRESS	501 SE 6TH AVE 104	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAYMOND, JOHN	
STREET ADDRESS	9160 SW 55TH ST	
CITY-ST-ZIP	COOPER CITY FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PATRICIA, ACHILLE	
STREET ADDRESS	501 SE 6TH AVE #307	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FELTMAN, JOHN C	
STREET ADDRESS	3134 NE 9TH ST	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DPHILIP GOUZE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PO BOX 21093	
STREET ADDRESS	FT. LAUDERDALE, FL 33335-1093	
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TIMOTHY HONDERICK	
STREET ADDRESS	506 N. VICTORIA TERR.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/03

CR2E037 (10/02)