

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762481

FILED  
Mar 03, 2011  
Secretary of State

**Entity Name:** EDGEMAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4517 EL MAR DR.  
LAUDERDALE BY THE SEA, FL 33308

**New Principal Place of Business:**

4517 EL MAR DR.  
APT. #6  
LAUDERDALE BY THE SEA, FL 33308

**Current Mailing Address:**

4517 EL MAR DR.  
#6  
LAUDERDALE BY THE SEA, FL 33308

**New Mailing Address:**

4517 EL MAR DR.  
APT. #6  
LAUDERDALE BY THE SEA, FL 33308

FEI Number: 59-2213334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DENDY, VERA  
4517 EL MAR DRIVE  
APT #6  
LAUDERDALE BY THE SEA, FL 33308 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: VD  
Name: BABIN, LINDA  
Address: 4517 EL MAR DRIVE , APT 9  
City-St-Zip: LAUD BY THE SEA, FL 33308

Title: TD  
Name: JACKSON, ESTHER  
Address: 4517 EL MAR DR APT 7  
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: PD  
Name: DENDY, VERA  
Address: 4517 EL MAR DR. APT 6  
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: SD  
Name: WUERZ, AMANDA  
Address: 4517 EL MAR DR APT 1  
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

I hereby 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 all other like empowered.

SIGNATURE: VERA DENDY

PD

03/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date