

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765758

FILED  
Mar 09, 2009  
Secretary of State

**Entity Name:** EDGEHILL COMMUNITY RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

50 WEST RIDGE RD.  
DAVENPORT, FL 33837

**New Principal Place of Business:**

**Current Mailing Address:**

50 WEST RIDGE RD.  
DAVENPORT, FL 33837

**New Mailing Address:**

**FEI Number:** 59-2235591

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, ROBERT H  
17 SANDALWOOD DRIVE  
DAVENPORT, FL 33837 US

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

ROPER, HEATHER  
9 SANDALWOOD DRIVE  
DAVENPORT, FL 33837 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: HEATHER ROPER

03/09/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: POJANI, IRENE  
Address: 10 SANDALWOOD DR  
City-St-Zip: DAVENPORT, FL 33837

Title: VD ( ) Delete  
Name: ISSACS, BARBARA  
Address: 21 CEDAR DR  
City-St-Zip: DAVENPORT, FL 33837

Title: TD ( ) Delete  
Name: SMITH, ROBERT  
Address: 17 SANDALWOOD DR  
City-St-Zip: DAVENPORT, FL 33837

Title: PD ( ) Delete  
Name: DIPALMA, FRED  
Address: 1B SANDALWOOD DRIVE  
City-St-Zip: DAVENPORT, FL 33837

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

Title: SD (X) Change ( ) Addition  
Name: FRANTZ, MICHELLE  
Address: 13 SANDALWOOD DR  
City-St-Zip: DAVENPORT, FL 33837

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: ROPER, HEATHER  
Address: 9 SANDALWOOD DR  
City-St-Zip: DAVENPORT, FL 33837

Title: PD (X) Change ( ) Addition  
Name: MILLER, JIM  
Address: 36 JUNIPER DRIVE  
City-St-Zip: DAVENPORT, FL 33837

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: HEATHER ROPER

TD

03/09/2009

Electronic Signature of Signing Officer or Director

Date