2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 812476

Entity Name: THE EDGEWATER ARMS, INC.

Current Principal Place of Business:

3600 GALT OCEAN DRIVE
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

3600 GALT OCEAN DRIVE
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-0861857   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

MULLEN AND BIZZARRO, P.A.
2929 EAST COMMERCIAL BOULEVARD
SUITE PH-C
FT LAUDERDALE, 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: PRES
Name: LAVERDURE, JEAN-PIERRE
Address: 3600 GALT OCEAN DR, # 9F
City-St-Zip: FT LAUDERDALE, FL 33308

Title: VP
Name: BARBARA, GRIFFIS
Address: 3600 GALT OCERAN DR, #12F
City-St-Zip: FT LAUDERDALE, FL 33308

Title: S
Name: LOUDON, JANET
Address: 3600 GALT OCEAN DR, #4A
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D
Name: CAMERON, ROBERT
Address: 3600 GALT OCEAN DR., #12E
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D
Name: FORTE, JOAN
Address: 3600 GALT OCEAN DR., #10C
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: T
Name: OHMEN, HEINZ DR.
Address: 3600 GALT OCEAN DR., #11A
City-St-Zip: FORT LAUDERDALE, 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA GRIFFIS   VP   03/19/2012
 Electronic Signature of Signing Officer or Director   Date