J33846

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Edgewater Properties, Inc.	
(Name of corporation)	
DOCUMENT NUMBER: J33846	<u> </u>
The enclosed Statement of Change of Registered Office/Agent and	i fee are submitted for filing
Please return all correspondence concerning this matter to the follow	owing:
G. Carson McEachern, Esq.)
(Name of person)	
Roetzel & Andress	
(Name of firm/company)	
850 Park Shore Drive, Suite 300	:
(Address)	1
Naples, Florida 34103	.
(City/state and zip code)	
For further information concerning this matter, please call:	,
G. Carson McEachern, Esq. at (239) 6	49-2713
(Name of person) (Area code & day	rtime telephone number)
Enclosed is a \$35.00 check made payable to the Department of Sta	ate.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399	

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CR2E045(07/02)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the	e provisions of se	ections 607.0502, 61	7.0502, 607.1508,	or 617.15	08, Florida Statute	35 ,
this statement of Florida	• • •	itted for a corporatio o change its register			-	ite
of Florida.						
1. The name of	the corporation:	Edgewater Prop	erties, Inc.			
2. The principal	office address:_	c/o G. Carson Me	cEachern, Esq.,	850 Park	Shore Drive,	
Suite 300	, Naples, Flori	da 34103				
3. The mailing	address (if differe	ent): (same)		}	FE	<u>ಣ</u> ಒ
4. Date of incom	rporation/qualific	ation: 09/16/1986	Documer	ıt number:	J33846	25
	d street address our artment of State:	of the current registere	ed agent and registe	red office	on file with the c	3
	Peter L. Gira	rdin				ب ب
	5147 Castelle	o Drive		i	97	n ,
	Naples, Flori	da 34103				
6. The name a	nd street address	of the new register	ed agent (if change	ed) and /or	registered office ((if
changed):	G. Carson Mo	Eachern, Esq.)		
	850 Park Sho	ore Drive, Suite 3		,	·	
	Naples, Flori	(P.O. Box or personal mail da 34103	box NOT acceptable)	: {		
The street addragent, as change	ress of its register ged will be identi	red office and the str	eet address of the b	rusiness of	fice of its registere	d
	as authorized by the board, or the	resolution duly adop	oted by its board of notified in writing	directors of the cha	or by an officer so	
(Signature of an office	er, chairman or vice chair	man of the board)	(Printed or ty	ro, Presi		
I hereby accept I further agree performance of registered age office address,	t the appointmen to comply with t f my duties, and nt. Or, if this do I hereby confirm	t as registered agent he provisions of all s I am familiar with ar cument is being filed a that the corporation	t and agree to act in statutes relative to ad accept the obliga merely to reflect a n has been notified	this capa the proper tion of my change in in writing	city. and complete position as the registered of this change.	
	Signature of Registered	(gent)	47	(Date)		
If signing on beha				i r		
	CEachern, Esc (Typed or Printed Name)		Registered Age	Capacity)		
	(•) Proming to a transmire tale () ((

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314