

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006527

FILED
Feb 27, 2006
Secretary of State

Entity Name: EDGEWATER AT GRAND OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 36-4505464

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC.
2180 W SR 434, SUITE 5000
LONGWOOD, FL 327795044 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: PD () Delete
Name: GRUTER, JOHN
Address: 10210 HIGHLAND MANOR DR SUITE 100
City-St-Zip: TAMPA, FL 33610

Title: VPD () Delete
Name: DANDINO, DENNY
Address: 10210 HIGHLAND MANOR DR SUITE 100
City-St-Zip: TAMPA, FL 33610

Title: STD () Delete
Name: BUSHWAY, MICHELLE
Address: 10210 HIGHLAND MANOR DR STE 100
City-St-Zip: TAMPA, FL 33610

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOFFERBERTH, MARK
Address: 4130 WINDING RIVER WAY
City-St-Zip: LAND O'LAKES, FL 34639

Title: VPD (X) Change () Addition
Name: SIMONSEN, ARIK
Address: 4221 WINDING RIVER WAY
City-St-Zip: LAND O'LAKES, FL 34639

Title: SD (X) Change () Addition
Name: DRASNER, MARCY
Address: 4336 WINDING RIVER WAY
City-St-Zip: LAND O'LAKES, FL 34639

Title: D () Change (X) Addition
Name: LITTLE, CRAIG
Address: 4409 SILVER FALLS DR
City-St-Zip: LAND O'LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK HOFFERBERTH

PD

02/27/2006

Electronic Signature of Signing Officer or Director

Date