

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010782

FILED
Feb 21, 2005
Secretary of State

Entity Name: EDGEWATER AT RIVER RIDGE COUNTRY CLUB ASSOCIATION, INC.

Current Principal Place of Business:

11324 RIDGE RD.
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

11324 RIDGE RD.
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 20-2071089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANKEL, ROBERT L ESQ.
1022 MAIN ST., SUITE D
DUNEDIN, FL 34698 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: BOYCE, MICHAEL D
Address: 11324 RIDGE RD.
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VD () Delete
Name: REYNOLDS, B.J.
Address: 11324 RIDGE RD.
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: STD () Delete
Name: WILLIAMSON, DONA J
Address: 11324 RIDGE RD.
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIKE BOYCE

PD

02/21/2005

Electronic Signature of Signing Officer or Director

Date