

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011116

FILED
Jul 19, 2007
Secretary of State

Entity Name: EDGEWATER ACRES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4648 NORTH HIGHWAY 441
OKEECHOBEE, FL 34972

New Principal Place of Business:

8648 SW 7TH LANE
OKEECHOBEE, FL 349741532 US

Current Mailing Address:

P O BOX 2076
OKEECHOBEE, FL 34974

New Mailing Address:

FEI Number: 20-3722853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CAMERON, COLIN M ESQ.
200 N.E. 4TH AVENUE
OKEECHOBEE, FL 349722981 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: EARHART, JON L
Address: 4648 NORTH HWY 441
City-St-Zip: OKEECHOBEE, FL 34972

Title: VD () Delete
Name: EARHART, COLLEEN C
Address: 4648 NORTH HWY 441
City-St-Zip: OKEECHOBEE, FL 34972

Title: DST () Delete
Name: HANCOCK, PAM
Address: 409 SE 8TH ST
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BANDI, MICKEY
Address: 8648 SW 7TH LANE
City-St-Zip: OKEECHOBEE, FL 349741532 US

Title: VD (X) Change () Addition
Name: EARHART, COLLEEN C
Address: 4648 NORTH HWY 441
City-St-Zip: OKEECHOBEE, FL 349728673 US

Title: DST (X) Change () Addition
Name: HANCOCK, PAM
Address: 8678 SW 7TH LANE
City-St-Zip: OKEECHOBEE, FL 349741532 US

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: COLIN M. CAMERON

RA

07/19/2007

Electronic Signature of Signing Officer or Director

_____ Date