

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008354

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** EDGEWATER OF CORAL GABLES CONDOMINIUM ASSOCIATION INC.

**Current Principal Place of Business:**

12350 SW 132 CT  
SUITE 114  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12350 SW 132 CT  
SUITE 114  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 20-3407924      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGEL, DAVID ESQ  
121 ALHAMBRA PLAZA  
SUITE 1000  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

EISINGER, DENNIS ESQ  
4000 HOLLYWOOD BLVD  
SUITE 265 SOUTH  
HOLLYWOOD, FL 33021 US

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: DENNIS EISINGER ESQ      04/29/2008  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ROSS, COLLIN  
Address: 35 EDGEWATER DR. 202  
City-St-Zip: CORAL GABLES, FL 33133

Title: VPD      ( ) Delete  
Name: ZOLLER, CHRISTOPHER  
Address: 900 BAYAMO AVE  
City-St-Zip: MIAMI, FL 33146

Title: SD      ( ) Delete  
Name: SOSA, SABRINA  
Address: 371 E. 57 ST.  
City-St-Zip: HIALEAH, FL 33013

**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 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: COLLIN ROSS      PD      04/29/2008  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date