

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90022 046 ****61.25

DOCUMENT # N06191		
1. Entity Name EDENWOLD HOMEOWNERS ASSOCIATION, INC.		

Principal Place of Business SIGNATURE REALTY MANAGEMENT 4003 HARTLEY RD JACKSONVILLE, FL 32257 US	Mailing Address 4003 HARTLEY ROAD JACKSONVILLE, FL 32257 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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01072008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3059905

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BRIAN CANTRELL SIGNATURE REALTY 4003 HARTLEY RD JACKSONVILLE, FL 32257	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____

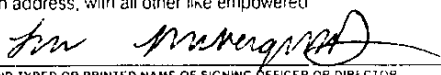
Signature of Trust or printed name of registered agent (and title, if applicable) STATE Registered Agent signature required when not printed NAME

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD FRANKLIN, JOHN 3129 WELESLEY SQUARE JACKSONVILLE, FL 32207 ☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROSENBERG, LEE 3139 WINSLOW SQUARE JACKSONVILLE, FL 32207 ☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BREITMOSER, HENRY 3141 WALTHAM SQUARE JACKSONVILLE, FL 32207 ☒ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Rosenberg, Lee 3139 Winslow Sq. Jax, FL 32207 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Calvert, Tilden 3126 Wellesley Sq. Jax, FL 32207 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Berger, Mary 3130 Waltham Sq. Jax, FL 32207 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11; if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: _____