

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 28, 2010
Secretary of State**

DOCUMENT# N06395

Entity Name: EDGEWATER ARMS MASTER ASSOCIATION, INC.

Current Principal Place of Business:

28100 US HIGHWAY 19 N
SUITE 205
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

28100 US HIGHWAY 19 N
SUITE 205
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 59-1615306 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

THOMAS, DOROTHY
28100 US HIGHWAY 19 N
SUITE 103
CLEARWATER, FL 33761 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: P
Name: TIRONE, GASPER
Address: 632 EDGEWATER DR. #731
City-St-Zip: DUNEDIN, FL 34698

Title: VP
Name: COOK, JENE
Address: 622 EDGEWATER DR., #221
City-St-Zip: DUNEDIN, FL 34698

Title: TD
Name: BRUTON, BOB
Address: 632 EDGEWATER DR. #533
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: PETTICORD, MARY
Address: 634 EDGEWATER DR., #343
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: CHRISTY, DAN
Address: 620 EDGEWATER DR. #202
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: SMALLEY, JOHN
Address: 620 EDGEWATER DR. #104
City-St-Zip: DUNEDIN, FL 34698

I hereby 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 all other like empowered.

SIGNATURE: GASPER TIRONE

P

07/28/2010

Electronic Signature of Signing Officer or Director

Date