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May 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N07166 (4)

1. Corporation Name

EDGEWATER PARK HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

13400 S.W. 115 COURT
MIAMI FL 33176

13519 S.W. 116 PLACE
MIAMI FL 33176-8332

3. Date Incorporated or Qualified
01/17/1985

3a. Date of Last Report
01/22/1996

2. Principal Place of Business

2a. Mailing Address

21 13800 S.W. 114th Rd.

26

4. FEI Number
59-2374222

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

MIAMI FL

MIAMI FL

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

33186

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZAMORA, MARIO
13519 S.W. 116 PLACE
MIAMI FL 33176

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME ZAMORA, MARIO
STREET ADDRESS 13519 SW 116 PLACE
CITY-ST-ZIP MIAMI FL 33176

1.1 TITLE Change Addition
1.2 NAME Kelly Bruuk
1.3 STREET ADDRESS 13526 SW 113 PL
1.4 CITY-ST-ZIP MIAMI, FL; 33176

TITLE SD DELETE
NAME CULLEN, L. CANDY
STREET ADDRESS 11275 SW 133 TERRACE
CITY-ST-ZIP MIAMI FL 33176

2.1 TITLE Change Addition
2.2 NAME FRANZ THAME
2.3 STREET ADDRESS 13339 SW 114 CT
2.4 CITY-ST-ZIP MIAMI, FL 33176

TITLE D DELETE
NAME ALBALATE, EULALIA
STREET ADDRESS 13404 SW 116 COURT
CITY-ST-ZIP MIAMI FL 33176

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VD DELETE
NAME GUTIERREZ, ANIBAL
STREET ADDRESS 13521 SW 113 PLACE
CITY-ST-ZIP MIAMI FL 33176

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE TD DELETE
NAME GOMEZ, WILFREDO
STREET ADDRESS 13334 SW 113 PLACE
CITY-ST-ZIP MIAMI FL 33176

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

By *M. Zamora* REGISTERED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/97

Date

305-251-22-31

Daytime Phone # 0032928

CR2E037 (9/96)