

2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N07166

1. Entity Name
EDGEWATER PARK HOMEOWNERS' ASSOCIATION, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 14 AM 9:11

Principal Place of Business
%COURTESY PROPERTY MANAGEMENT, INC.
13250 S 135 AVENUE
MIAMI, FL 33186 US

Mailing Address
%COURTESY PROPERTY MANAGEMENT, INC.
13250 S 135 AVENUE
MIAMI, FL 33186 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

09152004

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-2374222

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SKRLD INC
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VPD
NAME RODRIGUEZ, GREGORIO ☒ Delete
STREET ADDRESS 13333 S.W. 115 COURT
CITY-ST-ZIP MIAMI, FL 33176

TITLE TD
NAME TORRES, JOSE ☐ Delete
STREET ADDRESS 13518 S.W. 113 PLACE
CITY-ST-ZIP MIAMI, FL 33176

TITLE D
NAME ALSADAH, LEONOR ☒ Delete
STREET ADDRESS 13324 S.W. 115 PLACE
CITY-ST-ZIP MIAMI, FL 33176

TITLE D
NAME JENKINS, RAYMOND ☐ Delete
STREET ADDRESS 13413 S.W. 113 PLACE
CITY-ST-ZIP MIAMI, FL 33176

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME Jose Suarez ☐ Change ☒ Addition
STREET ADDRESS 13405 SW 113 PLACE
CITY-ST-ZIP MIAMI FL 33176

TITLE
NAME
STREET ADDRESS 500043365795
CITY-ST-ZIP 12/13/04--01058--022 **\$61.25

TITLE S
NAME Lydia Torres ☐ Change ☒ Addition
STREET ADDRESS 13532 SW 114 PLACE
CITY-ST-ZIP MIAMI FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME CARLOS OCASIO ☐ Change ☒ Addition
STREET ADDRESS 13523 SW 114 PLACE
CITY-ST-ZIP MIAMI FL 33176

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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

Daytime Phone #

9-14-04 311 254 3888

12/14/04