

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 07, 2009
Secretary of State**

DOCUMENT# N07166

Entity Name: EDGEWATER PARK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

13400 SW 115TH PLACE
MIAMI, FL 33176 US

New Principal Place of Business:

13400 SW 115TH CT
MIAMI, FL 33176 US

Current Mailing Address:

13400 SW 115TH PLACE
MIAMI, FL 33176 US

New Mailing Address:

1430 NW 15 AVENUE
MIAMI, FL 33125 US

FEI Number: 59-2374222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GLAZER & ASSOCIATES, P.A.
1920 E. HALLANDALE BEACH BLVD., STE. 806
HALLANDALE, FL 33009 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUAREZ, JOSE
Address: 13405 SW 113 PLACE
City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD () Delete
Name: TORRES, JOSE
Address: 13518 S.W. 113 PLACE
City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: JENKINS, RAY
Address: 13413 SW 113 PLACE
City-St-Zip: MIAMI, FL 33176

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Delete
Name: OCASIO, CARLOS
Address: 13523 SW 114 PLACE
City-St-Zip: MIAMI, FL 33176 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Delete
Name: TORRES, LYDIA
Address: 13329 SW 116 COURT
City-St-Zip: MIAMI, FL 33176 US

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: JOSE SUAREZ

P

05/07/2009

Electronic Signature of Signing Officer or Director

Date