

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 PM 12:04

DOCUMENT # N07834 (7)

1. Corporation Name

EDGEWOOD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1071 EDGEWOOD AVE S
JACKSONVILLE FL 32205

Mailing Address

1071 EDGEWOOD AVE S
JACKSONVILLE FL 32205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/26/1985

3a. Date of Last Report

02/17/1994

4. FEI Number

59-2491983

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BANNING, TERENCE K
6015 MORROW ST E #211
JACKSONVILLE FL 32217

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Terence K. Banning

TERENCE K. BANNING

2-3-95

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	VPD-
NAME	FENDRICK, CARL
STREET ADDRESS	1071 S. EDGEWOOD AVE.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	ST-
NAME	WILSON, GORGE
STREET ADDRESS	1071 S. EDGEWOOD AVE.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	VPD
NAME	GIBBS, ANN
STREET ADDRESS	1071 S. EDGEWOOD AVE.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	D
NAME	MCGRAW, JESSE
STREET ADDRESS	1071 S. EDGEWOOD AVE.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	D
NAME	UPDEGRAFF, JOHN
STREET ADDRESS	1071 S. EDGEWOOD AVE.
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	D
NAME	ZUZW, RON
STREET ADDRESS	4447 WATER OAK LANE
CITY-ST-ZIP	JACKSONVILLE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	☒ Change ☐ Addition
1.2 NAME	Diehl, CLARE	
1.3 STREET ADDRESS	1071 S. EDGEWOOD AVE	
1.4 CITY-ST-ZIP	JACKSONVILLE, FL	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Clare B. Diehl

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

(Signature) (Type) #