2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N21866

Entity Name: EDEN-DODGE ESTATES ASSOCIATION, INC.

Current Principal Place of Business:

217 SANDPIPER DRIVE
PALM BEACH, FL 33480 US

New Principal Place of Business:

Current Mailing Address:

C/O SHELTON CLYATT, JR
217 SANDPIPER DRIVE
PALM BEACH, FL 33480 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLYATT, SHELTON JR
217 SANDPIPER DRIVE
PALM BEACH, FL 33480 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:	D	( ) Delete
Name:	ROEHLING, KATE	
Address:	PLEASANT RUN FARM, 74 BARRY RD	
City-St-Zip:	LAMBERVILLE, NJ 08530	
Title:	D	( ) Delete
Name:	CLYATT, SHELTON	
Address:	217 SANDPIPER DRIVE	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	HEILIGENSTEIN, C E	
Address:	225 EDEN ROAD	
City-St-Zip:	PALM BEACH, FL	
Title:	D	( ) Delete
Name:	RUTHERFORD, NED	
Address:	257 TRADEWIND DRIVE	
City-St-Zip:	PALM BEACH, FL	
Title:	V	( ) Delete
Name:	ZIMMER, ROBERT	
Address:	341 EDEN ROAD	
City-St-Zip:	PALM BEACH, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: SHELTON CLYATT, JR. D 04/30/2009
Electronic Signature of Signing Officer or Director — Date