

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N30233 (3)
1. Corporation Name
ASSOCIATION OF EDGEWATER LANDING OWNERS, INC.



Principal Place of Business 601 HOMEPORTE TERR. EDGEWATER FL 32141 US	Mailing Address 150 DUNDEE RD. STE. A DAYTONA BEACH SHORES FL 32118 US
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3. Date Incorporated or Qualified 01/18/1989
4. FEI Number 59-2939879
Applied For ☐ Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

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. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent TJW MANAGEMENT CO. INC. 150 DUNDEE RD. STE. A DAYTONA BEACH SHORES FL 32118	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HAGAN, H.T.	1.2 NAME	
STREET ADDRESS	708 STARBOARD AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	EDGEWATER FL	1.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	THOMAS, BARRY	2.2 NAME	
STREET ADDRESS	811 STARBOARD AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	EDGEWATER FL	2.4 CITY-ST-ZIP	
TITLE	D ☒ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	WEIKLE, SHIRLEY	3.2 NAME	D
STREET ADDRESS	804 NAVIGATORS WAY	3.3 STREET ADDRESS	CHEESEMAN FAYE
CITY-ST-ZIP	EDGEWATER FL	3.4 CITY-ST-ZIP	711 HELMSMAN LANE
TITLE	DD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	MARTINEZ, RICHARD	4.2 NAME	
STREET ADDRESS	317 SCHOONER AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	EDGEWATER FL	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	O'DONNELL, JOHN	5.2 NAME	
STREET ADDRESS	747 NAVIGATORS AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	EDGEWATER FL	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: *John O'Donnell* **John O'Donnell 2-14-98**

CR2E037 (10/97)