2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N30233 1. Entity Name ASSOCIATION OF EDGEWATER LANDING OWNERS,

FILED Apr 24, 2006 8:00 am Secretary of State

04-24-2006 90370 022 ****70.00

INC.				TIST /						
Principal Place 601 HOMEPO EDGEWATER,	RT TERR.	S, FL 32118	US			100 00 00 13 0 E),	11 1) t i 1 11 1		
2. Principal Place of Business 3.		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		03212006 Ch	g-NP	CR2E0	37 (11/05)		
City & State		City & State			4. FEI Number 59-293987	9			plied For t Applicable	
Zip	Country	Zip	Country		5. Certificate of Sta		×	\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered Agent			7. Name and Addr	ress of New R	egistered .	Agent		
TJW MANAGEMENT CO. INC. 150 DUNDEE RD.			Name Street A	Name Street Address (P.O. Box Number is Not Acceptable)						
STE. A DAYTONA BEACH SHORES, FL 32118								<u>.</u>		
5.1110.12.13.5.10.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10.11.10			City	City FL Zip Code						
	named entity submits this statement fo ons of registered agent.	r the purpose of changing its re	egistered office or	register	red agent, or both, in	the State of Flo	orida. I am	familiar with,	and accept	
SIGNATURE _	Signature, typed or printed name of registered agent	and site if applicable. (NOTE:	Registered Agent signat	ure required	d when reinstating)		DATE			
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaign Trust Fund Contribu					\$5.00 May Be Added to Fees			k payable to rtment of St		
10.	OFFICERS AND DI	RECTORS	11.	,	ADDITIONS/CHANGE	S TO OFFICE	RS AND D	RECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D EMTER, GENE 513 PORTSIDE LANE EDGEWATER, FL 32141	🔀 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	521	rlotte Star Portside I	ane		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHIMANSKAS, CHARLES 763 NAVIGATORS WAY EDGEWATER, FL 32141	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	rag	ewater, FL	32141		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BAILEY, LINDA 314 SCHOONER AVE EDGEWATER, FL 32141	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	319	n Rorabaugh Schooner A	ve	7	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ODOM, DOYLE 718 HELMSMAN LANE EDGEWATER, FL 32141	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		ewater, FL	32141		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIPPEL, STANLEY 616 STARBOARD AVE EDGEWATER, FL 32141	∑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	705 Edg	Shaw Starboard ewater, FL			Change	Addition Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TROUT, WILLIAM 800 MASTHEAD LANE EDGEWATER, FL 32141	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	805	zabeth Jame Navigators	s Way		Change	Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED AND TYPED OR

Will, am H. Tros.