


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

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # N32371	
1. Entity Name EDGEWATER NORTH COMMERCE PARK PROPERTY OWNERS ASSOCIATION, INC.	

Principal Place of Business 6701 EDGEWATER COMM. PKWY. ORLANDO, FL 32810 US	Mailing Address 6701 EDGEWATER COMM. PKWY. ORLANDO, FL 32810 US
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01272006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2967892	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent VICKERS, TIM K 6701 EDGEWATER COMMERCE PKWY. ORLANDO, FL 32810
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOTTORF, KENT 6729 EDGEWATER COMM. PKWY. ORLANDO, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITE, JAMES 6830 EDGEWATER COMMERCE PKWY. ORLANDO, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD VICKERS, TIM K 6701 EDGEWATER COMMERCE PKWY. ORLANDO, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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U00000525078
05/04/06 80018-012 61.25

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 altogether like empowered.

SIGNATURE: Tim K. Vickers **Tim K. Vickers** 407 297-7546
4/14/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR