

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43846

FILED
Mar 30, 2007
Secretary of State

Entity Name: EDGEWOOD VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 592675
ORLANDO, FL 32859

New Principal Place of Business:

601 LAKE HARBOR CR
EDGEWOOD, FL 32809

Current Mailing Address:

P.O. BOX 592675
ORLANDO, FL 32859

New Mailing Address:

FEI Number: 59-3153281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISSEY, MIKE
606 LAKE HARBOR CIR
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

VANDERGRIFT, RAGAN
601 LAKE HARBOR CR.
EDGEWOOD, FL 32809 US

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: RAGAN VANDERGRIFT

03/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MORRISSEY, MIKE
Address: 606 LAKE HARBOR CIR
City-St-Zip: ORLANDO, FL 32809

Title: VD () Delete
Name: HOPKINS, HENRY
Address: 631 LAKE HARBOUR CIRCLE
City-St-Zip: ORLANDO, FL 32809

Title: STD () Delete
Name: MILAM, KRISTY
Address: 685 LAKE HARBOR CIRCLE
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VANDERGRIFT, RAGAN
Address: 601 LAKE HARBOR CR
City-St-Zip: EDGEWOOD, FL 32809

Title: VD (X) Change () Addition
Name: DAVIS, TIFFANY
Address: 661 LAKE HARBOR CR
City-St-Zip: EDGEWOOD, FL 32809

Title: STD (X) Change () Addition
Name: POZO, JOSEPH
Address: 679 LAKE HARBOR CIRCLE
City-St-Zip: EDGEWOOD, FL 32809

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH POZO

STD

03/30/2007

Electronic Signature of Signing Officer or Director

Date