

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44258

FILED
Feb 17, 2009
Secretary of State

Entity Name: EDGEWOOD RANCH ENDOWMENT, INC.

Current Principal Place of Business:

1451 EDGEWOOD RANCH ROAD
ORLANDO, FL 32858 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 185
WINDERMERE, FL 34786 US

New Mailing Address:

FEI Number: 59-3080606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNEGAN, STEPHEN D ESQ
800 NORTH MAGNOLIA AVENUE
SUITE #1500
ORLANDO, FL 32803 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: DST () Delete
Name: EASTWOOD, THOMAS
Address: 201 E. PINE ST, SUITE 1100
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: VEECH, ALEX
Address: 7308 DELLA DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: DV () Delete
Name: COCHRAN,, MALCOLM L
Address: 2014 DOWN WOODS LANE
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: FLORELL, RICHARD
Address: 1000 UNIVERSAL STUDIOS PLAZA
City-St-Zip: ORLANDO, FL 32819

Title: DP () Delete
Name: SIMON, DAVID
Address: 125 NORTH DRIVE
City-St-Zip: WINDERMERE, FL 34786

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: DAVID H. SIMON

DP

02/17/2009

Electronic Signature of Signing Officer or Director

Date