

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000526

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** EDGEWATER AT GULF HARBOUR HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1904 CLUBHOUSE DR  
SUN CITY CENTER, FL 33573

**New Principal Place of Business:**

**Current Mailing Address:**

15751 SAN CARLOS BLVD #8  
FT MYERS, FL 33908

**New Mailing Address:**

FEI Number: 59-3294454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DG SUITOR & ASSOCIATES  
15751 SAN CARLOS BLVD #8  
FORT MYERS, FL 33908 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: P ( ) Delete  
Name: SHAPIRO, DONALD  
Address: 11311 COMPASS POINT DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: VP ( ) Delete  
Name: BLOOMHALL, WILLIAM  
Address: 11361 COMPASS POINT DRIVE  
City-St-Zip: FT MYERS, FL 33908

Title: D ( ) Delete  
Name: GAVIN, JOHN  
Address: 14590 DORY LANY  
City-St-Zip: FORT MYERS, FL 33908

Title: T/S ( ) Delete  
Name: SMITH, GEOFFRY  
Address: 11351 LONGWATER CHASE CT  
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete  
Name: CAROSELLI, MARIE  
Address: 14611 HIGHLAND HARBOUR CT  
City-St-Zip: FORT MYERS, FL 33908

**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: DONALD SHAPIRO

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date