2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# N95000005752

Entity Name: THE GREENS AT EDGEWATER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1617 EDGEWATER LANE
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 374
PALMETTO, FL 34221 US

New Mailing Address:

1617 EDGEWATER LANE
PALMETTO, FL 34221 US

FEI Number: 65-0638960 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL, JOANNE
1617 EDGEWATER LN.
PALMETTO, FL 34221 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: CASCELLA, BOB
Address: 2707 EDGEWATER CRT
City-St-Zip: PALMETTO, FL 34221

Title: TD ( ) Delete
Name: CORMICK, RUTH
Address: 1706 EDGEWATER LN
City-St-Zip: PALMETTO, FL 34221

Title: SD ( ) Delete
Name: CAMPBELL, JOANNE
Address: 1617 EDGEWATER LN
City-St-Zip: PALMETTO, FL 34221

Title: S ( ) Delete
Name: MCALLISTER, JOE D
Address: 2612 EDGEWATER CT
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SPRINKLE, MARILYN
Address: 1704 EDGEWATER LN.
City-St-Zip: PALMETTO, FL 34221

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: MARILYN SPRINKLE P 01/27/2009
Electronic Signature of Signing Officer or Director — Date