

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2008
Secretary of State

DOCUMENT# N97000000901

Entity Name: EDGEWOOD 1-10 ASSOCIATION, INC.

Current Principal Place of Business:

22745 SW 66TH AVE
APT 204
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

22745 SW 66TH AVE
APT 204
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-0733672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTANEDA, JOYCE
22745 SW 66TH AVE
APT 204
BOCA RATON, FL 33428 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: PD () Delete
Name: LADELFA, BETTY
Address: 22745 SW 66TH AVE., APT 103
City-St-Zip: BOCA RATON, FL 33428

Title: VPD () Delete
Name: FRANK, VELLA
Address: 22765 SW 66TH AVE, APT 207
City-St-Zip: BOCA RATON, FL 33428

Title: DTS () Delete
Name: CASTANEDA, JOYCE
Address: 22745 SW 66TH AVE., APT 204
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: MAGNOTTA, IDA
Address: 22795 SW 66TH AVE., APT 207
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: COHEN, THELMA
Address: 22725 SW 66TH AVE., APT 201
City-St-Zip: BOCA RATON, FL 33428

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: JOYCE CASTANEDA

DTS

04/26/2008

Electronic Signature of Signing Officer or Director

_____ Date