

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000901

**FILED**  
**Mar 06, 2010**  
**Secretary of State**

**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:**

22725 SW 66TH AVE  
APT 201  
BOCA RATON, FL 33428

**Current Mailing Address:**

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

**New Mailing Address:**

22725 SW 66TH AVE  
APT 201  
BOCA RATON, FL 33428

**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:**

COHEN, THELMA  
22725 SW 66TH AVE.  
APT 201  
BOCA RATON, FL 33428 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: THELMA COHEN

03/06/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

Title: DTS  
Name: LAVENDER, JANICE  
Address: 8939 OLD PINE ROAD  
City-St-Zip: BOCA RATON, FL 33433

Title: VP  
Name: MCINTYRE, BARBARA  
Address: 22805 SW 66TH AVE. APT.202  
City-St-Zip: BOCA RATON, FL 33428

I hereby 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 all other like empowered.

SIGNATURE: JANICE LAVENDER

DTS

03/06/2010

Electronic Signature of Signing Officer or Director

Date