## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000002439

FILED Jan 08, 2012 Secretary of State

Entity Name: EDISON PARK NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1656 LLEWELLYN DR

FORT MYERS, FL 33901 US

Current Mailing Address: New Mailing Address:

1656 LLEWELLYN DR

FORT MYERS, FL 33901 US

FEI Number: 65-0991391 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DINGEE, GAIL G TRES 1656 LLEWELLYN DR

FORT MYERS, FL 33901 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: D

Name: BOCHETTE, LISTON
Address: 1632 LLEWELLYN DR
City-St-Zip: FORT MYERS, FL 33901

Title: VP

Name: BALOGH, FRANK
Address: LLEWELLYN DRIVE
City-St-Zip: FORT MYERS, FL 33901

Title: TRES

 Name:
 DINGEE, GAIL

 Address:
 1656 LLEWELYN DR

 City-St-Zip:
 FORT MYERS, FL 33901

Title: S

 Name:
 GAIDE, KIM

 Address:
 WOODLAWN AVE

 City-St-Zip:
 FORT MYERS, FL 33901

Title:

Name: BOCHETTE, LISTON
Address: 1632 LLEWELLYN DR
City-St-Zip: FORT MYERS, F 33901

Title: PRES

Name: CRAIG, MCLEAN Address: EUCLID AVE

City-St-Zip: FORT MYERS, FL 33901

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: GAIL GRADY DINGEE TRES 01/08/2012