

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707048

**FILED**  
**Jan 21, 2016**  
**Secretary of State**  
**CC1559399920**

**Entity Name:** 73 EDGEWATER DRIVE CONDOMINIUM INC

**Current Principal Place of Business:**

73 EDGEWATER DR  
SUITE 2  
CORAL GABLES, FL 33133

**Current Mailing Address:**

73 EDGEWATER DR #2  
SUITE 2  
CORAL GABLES, FL 33133 US

**FEI Number:** 65-0267752

**Certificate of Status Desired:** No

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

MORETZ, ARLENE M  
73 EDGEWATER DR #2  
SUITE 2  
CORAL GABLES, FL 33133 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:** ARLENE M MORETZ

01/21/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name BANKO, CONNIE  
Address 73 EDGEWATER DR #4  
City-State-Zip: CORAL GABLES FL 33133

Title T  
Name MORETZ, ARLENE M  
Address 73 EDGEWATER DR #2  
APT 2  
City-State-Zip: CORAL GABLES FL 33133

Title S  
Name RIVERA, LESLIE  
Address 73 EDGEWATER DR #1  
City-State-Zip: CORAL GABLES FL 33133

Title VPD  
Name VALENTA, VIRGINIA  
Address 73 EDGEWATER DR #3  
City-State-Zip: CORAL GABLES FL 33133

*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:** ARLENE M MORETZ

**AGENT/TREASURER**

01/21/2016

Electronic Signature of Signing Officer/Director Detail

Date