

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750727

Entity Name: EDGEWATER MANOR HOMEOWNER'S ASSOCIATION

Current Principal Place of Business:

2109 EDGEWATER CIRCLE
WINTER HAVEN, FL 33880-4647

Current Mailing Address:

P.O. BOX 2093
WINTER HAVEN, FL 33883-2093 US

FEI Number: 59-2882825

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HAZELWOOD, HARRY W
2109 EDGEWATER CIRCLE, SE
WINTER HAVEN, FL 33880 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

Officer/Director Detail :

Title P
Name GALLAGHER, JIM
Address 2119 EDGEWATER CIRCLE
City-State-Zip: WINTER HAVEN FL 33880

Title VP
Name CHOUINARD, KAREN
Address 2110 EDGEWATER CIRCLE
City-State-Zip: WINTER HAVEN FL 33880

Title S
Name WINTERS, DEBORAH
Address 2122 EDGEWATER CIRCLE
SOUTHEAST
City-State-Zip: WINTER HAVEN FL 33880

Title D
Name GABRIEL, LINDA
Address 2113 EDGEWATER CIR S.E.
City-State-Zip: WINTER HAVEN FL 33880

Title T
Name HAZELWOOD, HARRY W
Address 2109 EDGEWATER CIRCLE
City-State-Zip: WINTER HAVEN FL 33880

Title D
Name LEE, JAMES
Address 2117 EDGEWATER CIRCLE
City-State-Zip: WINTER HAVEN FL 33880

Title DIRECTOR
Name KUHN, CHARLES
Address 2131 EDGEWATER CIRCLE
City-State-Zip: WINTER HAVEN FL 33880-4647

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: HARRY W. HAZELWOOD

03/14/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date