

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000005868

**Entity Name:** SAN REMO OF EDGEWATER HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 01, 2013**  
**Secretary of State**  
**CC5977821588**

**Current Principal Place of Business:**

102 SAN REMO DR.  
EDGEWATER, FL 32141

**Current Mailing Address:**

P.O. BOX 1205  
EDGEWATER, FL 32132

**FEI Number: 11-3680121**

**Certificate of Status Desired: No**

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

LAROCHELLE, JOCELYN A  
102 SAN REMO DR.  
EDGEWATER, FL 32141 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:** JOCELYN LAROCHELLE

04/01/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name RICHARD, KAUTTER  
Address 110 SAN REMO DRIVE  
City-State-Zip: EDGEWATER FL 32141

Title V  
Name ALRED, DOUG  
Address 121 SAN REMO DR.  
City-State-Zip: EDGEWATER FL 32141

Title T  
Name ALRED, SALLY  
Address 121 SAN REMO DR.  
City-State-Zip: EDGEWATER FL 32141

Title S  
Name LAROCHELLE, JOCELYN  
Address 102 SAN REMO DR.  
City-State-Zip: EDGEWATER FL 32141

Title M  
Name KEAZIRIAN, DAVID  
Address 108 SAN REMO DR.  
City-State-Zip: EDGEWATER FL 32141

*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:** JOCELYN LAROCHELLE

**SECRETARY**

04/01/2013

Electronic Signature of Signing Officer/Director Detail

Date