

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07166

**Entity Name:** EDGEWATER PARK HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

13400 SW 115TH CT  
MIAMI, FL 33176

**Current Mailing Address:**

8200 NW 41 ST  
SUITE 200  
DORAL, FL 33166 US

**FEI Number:** 59-2374222

**Certificate of Status Desired:** No

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

CUEVAS & GARCIA, P.A.  
7300 N KENDALL DR, #680  
MIAMI, FL 33156 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:** JOSE SUAREZ

01/24/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SUAREZ, JOSE  
Address        8200 NW 41 ST  
                  SUITE 200  
City-State-Zip: DORAL FL 33166

Title            TREASURER  
Name            HODGSON, CLAUDIA  
Address        8200 NW 41 ST  
                  SUITE 200  
City-State-Zip: DORAL FL 33166

Title            VP  
Name            JENKINS, NERVILLE R  
Address        8200 NW 41 ST  
                  SUITE 200  
City-State-Zip: DORAL FL 33166

Title            DIRECTOR  
Name            OCASIO, CARLOS  
Address        8200 NW 41 ST  
                  SUITE 200  
City-State-Zip: DORAL FL 33166

Title            SECRETARY  
Name            TORRES, LYDIA  
Address        8200 NW 41 ST  
                  SUITE 200  
City-State-Zip: DORAL FL 33166

*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:** JOSE SUAREZ

PRESIDENT

01/24/2020

Electronic Signature of Signing Officer/Director Detail

Date