## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12434

Entity Name: EDEN OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:** 

16281 PERDIDO KEY DRIVE PENSACOLA, FL 32507

**Current Mailing Address:** 

16281 PERDIDO KEY DRIVE PENSACOLA, FL 32507

FEI Number: 59-2635427 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THOMAS, WALTER 322 NORTH 61ST AVE PENSACOLA, FL 32506 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: WALTER THOMAS 01/11/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** 

POST, RICHARD Name TETTENHORST, LESTER Name Address 26 WILLOW HILL ROAD Address 1727 OAK AVE City-State-Zip: ST. LOUIS MO 63124 **EVANSTON IL 60201** City-State-Zip:

Title **SECRETARY** Title **BROKER** 

Name ADAMS, APRIL HOFFMAN, CHARLES D Name

Address 2014 CORAL REEF ROAD Address 4018 INDIGO DRIVE PENSACOLA FL 32506 City-State-Zip: City-State-Zip: PENSACOLA FL 32507

Title DIRECTOR \/P Title

Name SCHROEDER, STANLEY Name HUNT, GARY Address 13025 WINDING TRAIL 4900 STONEWALL RD Address

City-State-Zip: ST. LOUIS MO 63131 City-State-Zip: OPELIKA AL 36801

Title DIRECTOR DEAN, JAMES Name 519 OAK COURT Address

PANAMA CITY FL 32404 City-State-Zip:

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.

01/11/2023 SIGNATURE: RICHARD POST **BOOKKEEPER** 

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Jan 11, 2023

**Secretary of State** 

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