

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90028 028 ****61.25

DOCUMENT # F02000004541
 1. Entity Name
 BRIDGEWATER COLLEGE INCORPORATED



Principal Place of Business 402 EAST COLLEGE ST. BRIDGEWATER, VA 22812	Mailing Address CAMPUS BOX 33 BRIDGEWATER, VA 22812
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40001377



01052005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-0506306	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 MUNTZING, WILLIAM H
 1102 WEST OAK ST.
 KISSIMMEE, FL 34741

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C KEELER, JAMES L 13232 N. VALLEY DRIVE TIMBERVILLE, VA 22853
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC MASON, MARION E P.O. BOX 267 BRIDGEWATER, VA 22812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARNHART, GLENN R DR. 1624 ARROWHEAD POINT VIRGINIA BEACH, VA 23455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTER, REV. L. CLYDE JR P.O. BOX 196 DALEVILLE, VA 24083
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STONE, PHILLIP C 409 EAST COLLEGE ST. BRIDGEWATER, VA 22812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCOTT, CHARLES H 1556 CUMBERLAND DR. HARRISONBURG, VA 22801

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James B Keeler VICE PRESIDENT 1-5-05 540-828-5470
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #