FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # N9600002117

Corporation Name

BRIDGEVIEW ESTATES PROPERTY OWNER'S ASSOCIATION, INC.

Principal Place of Business	AILITARY TRAIL								
786 S. MILITARY TRAIL									
DEERFIELD BEACH FL 33442									

2. Principal Place of Business

Mailing Address

2a. Mailing Address

786 S. MILITARY TRAIL DEERFIELD BEACH FL 33442

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90087 045 ****61.25



3. Date Incorporated or Qualifed

04/18/1996

Suite Ant	Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number	Ar	plied For	
7						59-2952029			ot Applicable
(2)		City & State				30 2002020			Additional
City & State	8	⊢ , ′				5. Certifcate of Status Desired		~~	equired
3	Country	28	Cou	ntrv		6. Election Campaign Financing		\$5.00	
Zip	——— ·	⊢ '	30	3		Trust Fund Contribution		Added	
4	25 Surrent	29 Agent	30	l		10. Name and Address of New	Registered A		
	9. Name and Address of Current	Kegisteren Agent		81	Name	Total Carlo and Fragulation of Comments			
									<u>. </u>
CORPORATION SERVICE COMPANY				82	Street Addres	ss (P.O. Box Number is Not Accept	able)		
1201 HAYS STREET TALLAHASSE FL 32301								 	
								•	
				84	City			85 Zip	Code
					•		<u>FL</u>	<u> </u>	<u></u>]
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was a ons of, Section 617.0503, Flo	onda Stat	utes.	ine corporation	is board of directors. Thereby acce	pt the appoin	itment as re	gistered
12.	Signature, typed or printed name of registered agent of OFFICERS AND		13.	Agent	ogradue required	ADDITIONS/CHANGES TO OF		D DIRECTO	ORS IN 12
	PD OFFICERS AND	DELETE	1.1 TI	n F				Change	☐ Addition
TITLE	· -		1.2 N						
NAME	RYAN, WILLIAM H								
STREET ADDRESS	786 S. MILITARY TRAIL				ADDRESS				•
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		_	TY-ST	-ZIP			Change	Addition
TITLE	D	☐ DELETE	2.1 TI	TLE	ļ			Change.	
NAME	RYAN, WILLIAM J		2.2 N	ME	1				
STREET ADDRESS	786 S. MILITARY TRAIL		2.3 \$1	REET	ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		2.40	TY-\$1	r-ZIP				
TITLE	D	☐ DELETE	3,1 1	TLE	1	and the second second second second		Change	Addition
NAME	RYAN, JOAN J		3.2 N	AME		-			
STREET ADDRESS	786 S. MILITARY TRAIL		3.3 ST	REET	ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		3.4. C	rr-si	r-ZiP				
TITLE		☐ DELETE	4.1 Ti	πE				Change	☐ Addition
NAME			4.2 N	AME					
STREET ADDRESS			4.3 S	REET	ADDRESS				
CITY-ST-ZIP				TY-ST					
TITLE	 	[] DELETE	5.1 TI					Change	Addition
NAME			5.2 N						
			535	REET	ADDRESS				_
STREET ADDRESS				TY-ST					
CITY-ST-ZIP		☐ DELETE	6.1 TI		- sulf	-		☐ Change	Addition
TITLE		□ nerele	6.2 N						
NAME	}		1		ADDDECE				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	partify that the information currelind with			TY-ST			I further or	ifu that the	information
14 Ibcarbure		, thin filing door not qualify fo	or the eve	mntid	on etated in Se	ection 119 070300 Florida Statutes	THORPER CAP	av mai inė	nomanon

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 annual report or experienced annual 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 report of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attackment with an address, with all other like empowered.

SIGNATURI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/99

(954) 427-5599

CRZEUS/ (11/96)