

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008435

**FILED**  
**Feb 25, 2015**  
**Secretary of State**  
**CC5827650218**

**Entity Name:** BRIDGEWATER AT BAYSIDE LAKES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1331 BEDFORD DRIVE  
#103  
MELBOURNE, FL 32940

**Current Mailing Address:**

1331 BEDFORD DRIVE  
#103  
MELBOURNE, FL 32940

**FEI Number: 27-0019654**

**Certificate of Status Desired: No**

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

WHITMAN, RICHARD L  
1331 BEDFORD DRIVE  
#103  
MELBOURNE, FL 32940 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SMITH, STACEY  
Address        1331 BEDFORD DRIVE, #103  
City-State-Zip: MELBOURNE FL 32940

Title            VP  
Name            FLEMING, TOM  
Address        1331 BEDFORD DRIVE, #103  
City-State-Zip: MELBOURNE FL 32940

Title            S  
Name            PETRINO, JIM  
Address        1331 BEDFORD DRIVE, #103  
City-State-Zip: MELBOURNE FL 32940

Title            DIRECTOR  
Name            DOUGHERTY, JOHN  
Address        1331 BEDFORD DRIVE, #103  
City-State-Zip: MELBOURNE FL 32940

Title            TREASURER  
Name            SWATEK, KEN  
Address        1331 BEDFORD DRIVE, SUITE 103  
City-State-Zip: MELBOURNE FL 32940

*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: STACEY SMITH**

**PRESIDENT**

**02/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date