

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

DOCUMENT# N09000006441

**FILED  
Apr 27, 2015  
Secretary of State  
CC9561445145**

**Entity Name:** MARTINIQUE II AT BRIDGETOWN HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10401 N. DEERWOOD PARK BLVD  
SUITE 2130  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

10401 N. DEERWOOD PARK BLVD  
SUITE 2130  
JACKSONVILLE, FL 32256

**FEI Number: 27-0471330**

**Certificate of Status Desired: No**

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

EVERGREEN LIFESTYLES MANAGEMENT  
10401 N. DEERWOOD PARK BLVD  
SUITE 2130  
JACKSONVILLE, FL 32256 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	P
Name	BUEGE, JERRY
Address	10401 DARTINGTON DR
City-State-Zip:	FT MYERS FL 33913
Title	VP
Name	HAMBLETT, ALLUN
Address	10401 DARTINGTON DRIVE
City-State-Zip:	FT MYERS FL 33913
Title	SECRETARY
Name	MITCHELL, MARY
Address	10401 DARTINGTON DRIVE
City-State-Zip:	FORT MYERS FL 33913

Title	VP
Name	LARSON, CARL
Address	10401 DARTINGTON DRIVE
City-State-Zip:	FT MYERS FL 33913
Title	TREASURER
Name	MORRIS, TOM
Address	10401 DARTINGTON DRIVE
City-State-Zip:	FORT MYERS FL 33913

*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: JERRY BUEGE**

**PRESIDENT**

**04/27/2015**

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

\_\_\_\_\_  
Date