

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001695

**Entity Name:** BRIDGEWATER HOMEOWNERS ASSOCIATION OF MERRITT ISLAND, INC.

**FILED**  
**Jan 18, 2016**  
**Secretary of State**  
**CC1394268902**

**Current Principal Place of Business:**

2722 BARROW DRIVE  
MERRITT ISLAND, FL 32952

**Current Mailing Address:**

P O BOX 542226  
MERRITT ISLAND, FL 32954 US

**FEI Number: 59-3244920**

**Certificate of Status Desired: No**

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

HALE, CAROLYN H  
2722 BARROW DRIVE  
MERRITT ISLAND, FL 32952 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:** CAROLYN H. HALE

01/18/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HALE, CAROLYN H  
Address        2722 BARROW DRIVE  
City-State-Zip: MERRITT ISLAND FL 32952

Title            TREASURER  
Name            FRASIER, PATRICIA  
Address        2713 BARROW DR.  
City-State-Zip: MERRITT ISLAND FL 32952

Title            VP  
Name            PROBERT, MARIE  
Address        2707 BARROW DRIVE  
City-State-Zip: MERRITT ISLAND FL 32952

Title            SECRETARY  
Name            WEIBERT, SUSAN  
Address        847 WOODBINE DR  
City-State-Zip: MERRITT ISLAND FL 32952

*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:** CAROLYN H. HALE

**PRESIDENT**

01/18/2016

Electronic Signature of Signing Officer/Director Detail

Date