

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 174188

FILED
Mar 31, 2009
Secretary of State

Entity Name: BAYRIDGE CORPORATION

Current Principal Place of Business:

125 GUMBO LIMBO RD
ISLAMORADA, FL 33036

New Principal Place of Business:

137 PIPPIN DRIVE
ISLAMORADA, FL 33036

Current Mailing Address:

P.O. BOX 1146
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 59-0965810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UPCHURCH, CLYDE
125 GUMBO LIMBO ROAD
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

PEDERSEN, LOUISE R
121 PIPPIN DRIVE
ISLAMORADA, FL 33036 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: LOUISE R. PEDERSEN 03/31/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: UPCHURCH, CLYDE
Address: 125 GUMBO LIMBO ROAD
City-St-Zip: ISLAMORADA, FL 33036

Title: T () Delete
Name: PORTER, VICTOR
Address: 112 PIPPIN DRIVE
City-St-Zip: ISLAMORADA, FL 33036

Title: D () Delete
Name: O'CATHEY, JEROLD
Address: 109 GUMBO LIMBO RD
City-St-Zip: ISLAMORADA, FL 33036

Title: VP () Delete
Name: TEACH, JOAN
Address: 122 PIPPIN DR.
City-St-Zip: ISLAMORADA, FL 33036

Title: D () Delete
Name: STONE, PATRICIA
Address: 109 PIPPIN DRIVE
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: UPCHURCH, CLYDE
Address: 125 GUMBO LIMBO ROAD
City-St-Zip: ISLAMORADA, FL 33036

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: PEDERSEN, LOUISE
Address: 121 PIPPIN DRIVE
City-St-Zip: ISLAMORADA, FL 33036

Title: S (X) Change () Addition
Name: TEACH, JOAN
Address: 122 PIPPIN DR.
City-St-Zip: ISLAMORADA, FL 33036

Title: D (X) Change () Addition
Name: LEE, LAURA
Address: 110 PIPPIN DRIVE
City-St-Zip: ISLAMORADA, FL 33036

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LOUISE R. PEDERSEN PRES 03/31/2009
Electronic Signature of Signing Officer or Director Date