

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 299522

FILED
Apr 30, 2009
Secretary of State

Entity Name: BRIDGEHAMPTON INC.

Current Principal Place of Business:

801 N. OCEAN BOULEVARD
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

801 N. OCEAN BOULEVARD
DELRAY BEACH, FL 33483

New Mailing Address:

817 GEORGE BUSH BLVD.
DELRAY BEACH, FL 33483

FEI Number: 59-1159154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLERANO, JAMES A JR
1201 GEORGE BUSH BLVD.
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RHODES, NED
Address: 801 N OCEAN BLVD 4
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: WYCRROLL, GEORGE MRS
Address: 801 N OCEAN BLVD #1
City-St-Zip: DELRAY BCH, FL 33483

Title: PD () Delete
Name: CONDIE, PARKER B
Address: 801 N. OCEAN BLVD. APT. 10
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: COPPEDGE, ROY F.
Address: 801 N. OCEAN BLVD
City-St-Zip: DELRAY BCH, FL

Title: VPDT () Delete
Name: SMITH, MARCUS
Address: 801 N OCEAN BLVD #5
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: RHODES, NED
Address: 801 N OCEAN BLVD 4
City-St-Zip: DELRAY BEACH, FL 33483

Title: D (X) Change () Addition
Name: WYCROFF, ELEANOR MRS
Address: 801 N OCEAN BLVD #1
City-St-Zip: DELRAY BCH, FL 33483

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

Title: TD (X) Change () Addition
Name: COPPEDGE, ROY F.
Address: 801 N. OCEAN BLVD
City-St-Zip: DELRAY BCH, FL

Title: SD (X) Change () Addition
Name: SMITH, MARCUS
Address: 801 N OCEAN BLVD #5
City-St-Zip: DELRAY BEACH, FL 33483

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: PARKER CONDIE

PD

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date