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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CORPORATION ANNUAL REPORT 1995
FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727344 (4)
1. Corporation Name
VILLAGE OF BRIDGEWOOD ASSOCIATION, INC.

Principal Place of Business Mailing Address
2400 BRIDGEWOOD DR. BOCA RATON FL 33434
2400 BRIDGEWOOD DR. BOCA RATON FL 33434

3. Date Incorporated or Qualified: 08/16/1973
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1506970
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suits, Apt. #, etc. 26 Suits, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 Zip Country 25 Zip Country 29 Zip Country 30 Zip Country

9. Name and Address of Current Registered Agent
MEYER, CAROL J JR
2400 BRIDGEWOOD DR
BOCA RATON FL 33434

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and fee # applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE SD
NAME FEUERMAN, ARNOLD
STREET ADDRESS 2901 BRIDGEWOOD LN
CITY-ST-ZIP BOCA RATON FL
TITLE TD
NAME HEYMAN, JUDITH S.
STREET ADDRESS 1874 BRIDGEWOOD DR
CITY-ST-ZIP BOCA RATON FL
TITLE D
NAME WARMFLASH, HERBERT
STREET ADDRESS 1307 BRIDGEWOOD DR
CITY-ST-ZIP BOCA RATON FL
TITLE PD
NAME TAYLOR, JOYCE
STREET ADDRESS 1672 BRIDGEWOOD DR
CITY-ST-ZIP BOCA RATON FL
TITLE VD
NAME BLODINGER, JACK
STREET ADDRESS 2208 BRIDGEWOOD DR
CITY-ST-ZIP BOCA RATON FL
TITLE VD
NAME BUSH, IRWIN
STREET ADDRESS 402 BRIDGEWOOD CT
CITY-ST-ZIP BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME GODSHAW, HAL
3.3 STREET ADDRESS 1003 BRIDGEWOOD DR.
3.4 CITY-ST-ZIP BOCA RATON FL
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME MODEST, ARLENE
6.3 STREET ADDRESS 101 BRIDGEWOOD CT
6.4 CITY-ST-ZIP BOCA RATON FL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE: *Joyce S. Taylor* 4/17/95 407483-7133
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #
JOYCE S. TAYLOR