

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727347 (7)

1. Corporation Name

BRIDGEWOOD MID-RISE CONDOMINIUM I ASSOCIATION, I
NC.



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
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1508070

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEYER, CAROL J JR
2400 BRIDGEWOOD DR
BOCA RATON FL 33434

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME TAYLOR, JOYCE
STREET ADDRESS 1672 BRIDGEWOOD DR.
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE VD
NAME TROCCOLO, CHARLES
STREET ADDRESS 1734 BRIDGEWOOD DR.
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE TD
NAME NORTON, EDWARD
STREET ADDRESS 1723 BRIDGEWOOD DR.
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE SD
NAME SIEGEL, FRIEDA
STREET ADDRESS 1575 BRIDGEWOOD DR
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE VD
NAME THOMPSON, ARTHUR
STREET ADDRESS 1624 BRIDGEWOOD DR.
CITY-ST-ZIP BOCA RATON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

D PEREIRA, RITA
1042 BRIDGEWOOD DR
BOCA RATON FL

Change Addition

V/T/D

Change Addition

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 119.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOYCE TAYLOR, PRES.

4/1/96

Date

407 483-7183

Daytime Phone

CR2E037 (12/95)