


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 09, 2008 08:00 A
Secretary of State

DOCUMENT # 729595 1. Entity Name BRIDGEWOOD TOWNHOUSE CONDOMINIUM II ASSOCIATION, INC.	
--	---

Principal Place of Business 2400 BRIDGEWOOD DRIVE BOCA RATON, FL 33434	Mailing Address 2400 BRIDGEWOOD DRIVE BOCA RATON, FL 33434
--	--

DO NOT WRITE IN THIS SPACE



03132008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1644363	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CAROL J MEYER JR 2400 BRIDGEWOOD DR BOCA RATON, FL 33434	DO NOT WRITE IN THIS SPACE
---	---------------------------------------

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARON, ALVIN 2206 BRIDGEWOOD DRIVE BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TREFF, ARNOLD 2307 BRIDGEWOOD DRIVE BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLODINGER, JACK 2208 BRIDGEWOOD DRIVE BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PRINCE, HARVEY 2111 BRIDGEWOOD DRIVE BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOLDSTEIN, ARTHUR 2403 BRIDGEWOOD DRIVE BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

04/22/08-00030-013 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Carol J Meyer</i> Registered Agent 4-7-08	561-483-7133
<small>SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>