

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003705

FILED  
Jan 06, 2011  
Secretary of State

Entity Name: BRIDLEWOOD ASSOCIATES, INC.

**Current Principal Place of Business:**

51 GREY WING POINT  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

51 GREY WING POINT  
NAPLES, FL 34113

**New Mailing Address:**

FEI Number: 20-1078281

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARDESTY, WELLS P  
51 GREY WING POINT  
NAPLES, FL 34113 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

**OFFICERS AND DIRECTORS:**

Title: CPT  
Name: HARDESTY, WELLS P  
Address: 51 GREY WING POINT  
City-St-Zip: NAPLES, FL 34113

Title: S  
Name: AMENT, JOSEPH  
Address: 191 NORTH WACKER DRIVE, SUITE 1800  
City-St-Zip: CHICAGO, IL 60606

I hereby 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 all other like empowered.

SIGNATURE: WELLS P HARDESTY

PRES

01/06/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date