FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 PM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M95651** **(9)**

1. Corporation Name

BRIDGEWATER ASSOCIATES, INC.

Principal Place of Business	Mailing Address
% C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 US	% C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/24/1988	3a. Date of Last Report: 07/07/1994
4. FEI Number: 22-2917158	☐ 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	

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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	P	☒ Change ☐ Addition
NAME	MARTIN, T.D.	1.2 NAME	Carr, J. J.	
STREET ADDRESS	ONE CYANAMID PLAZA	1.3 STREET ADDRESS	Five Giralda Farms	
CITY-ST-ZIP	WAYNE NJ	1.4 CITY-ST-ZIP	Madison, NJ 07940	
TITLE	PTD	2.1 TITLE	VP	☒ Change ☐ Addition
NAME	NASH, J. F.	2.2 NAME	Nee, T. M.	
STREET ADDRESS	ONE CYANAMID PLAZA	2.3 STREET ADDRESS	Five Giralda Farms	
CITY-ST-ZIP	WAYNE NJ	2.4 CITY-ST-ZIP	Madison, NJ 07940	
TITLE	VPD	3.1 TITLE	S	☒ Change ☐ Addition
NAME	MCAULIFFE, J.S.	3.2 NAME	Emerling, C.G.	
STREET ADDRESS	ONE CYANAMID PLAZA	3.3 STREET ADDRESS	Five Giralda Farms	
CITY-ST-ZIP	WAYNE NJ	3.4 CITY-ST-ZIP	Madison, NJ 07940	
TITLE	S	4.1 TITLE	AT	☒ Change ☐ Addition
NAME	BRENNAN, A C	4.2 NAME	Samuel, C. M.	
STREET ADDRESS	ONE CYANAMID PLAZA	4.3 STREET ADDRESS	One Cyanamid Plaza	
CITY-ST-ZIP	WAYNE NJ	4.4 CITY-ST-ZIP	Wayne, NJ 07470	
TITLE	AS	5.1 TITLE	D	☒ Change ☐ Addition
NAME	MCAULIFFE, J. S	5.2 NAME	Stafford, J. R.	
STREET ADDRESS	ONE CYANAMID PLAZA	5.3 STREET ADDRESS	Five Giralda Farms	
CITY-ST-ZIP	WAYNE NJ	5.4 CITY-ST-ZIP	Madison, NJ 07940	
TITLE		6.1 TITLE	D	☒ Change ☐ Addition
NAME		6.2 NAME	Blount, R. G.	
STREET ADDRESS		6.3 STREET ADDRESS	Five Giralda Farms	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Madison, NJ 07940	

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)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Charles M. Samuel 4/24/95 (201)831-2000
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Asst. Treasurer — Date — (Daytime Phone #)

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BRIDGEWATER ASSOCIATES, INC.

President	Carr, J. J.	Five Giralda Farms Madison, New Jersey 07940
Vice President	Considine, J. R.	Five Giralda Farms Madison, New Jersey 07940
Vice President	Heinrich, P. M.	Five Giralda Farms Madison, New Jersey 07940
Vice President	Nee, T. M.	Five Giralda Farms Madison, New Jersey 07940
Secretary	Emerling, C. G.	Five Giralda Farms Madison, New Jersey 07940
Treasurer	Parker, R. E.	Five Giralda Farms Madison, New Jersey 07940
Asst. Treasurer	Samuel, C. M.	One Cyanamid Plaza Wayne, New Jersey 07470
Asst. Secretary	Kelly, W. P.	Five Giralda Farms Madison, New Jersey 07940

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BRIDGEWATER ASSOCIATES, INC.

DIRECTORS:

Stafford, J. R.	Five Giralda Farms Madison, New Jersey 07940
Blount, R. G.	Five Giralda Farms Madison, New Jersey 07940
Carr, J. J.	Five Giralda Farms Madison, New Jersey 07940