2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 07, 2005 8:00 am Secretary of State

DOCUMENT # N02000009928 1. Entity Name BAINBRIDGE OAKS OWNERS ASSOCIATION, INC.								03-07-2	:005 90	255 00	08 ***15	0.00
4997-A O'NIEL LN 4997			iling Address 197-A O'NIEL LN LLAHASSEE, FL 32303				66024299					
2. Principal Place of Business 3. Ma			Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				07052005	Chg-NP		CR2E0	37 (10/03)	
City & State City & S			& State				4. FEI Numbe	EOR 6	5- 02	023	57 A	oplied For ot Applicable
Zip	Country	Zip	Zip Cou				5. Certificate	of Status De	sired		\$8.75 Ad Fee Require	
	6. Name and Address of Cu	ırrent Registere	d Agent				7. Name and	Address of	New Reg	istered	Agent	
DELHAM	DANA				Name							
PELHAM, DANA 4997-A O'NIEL LN TALLAHASSEE, FL 32303				Street Ad	ldress (F	P.O. Box Numbe	r is Not Acc	eptable)				
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					City				•	FL	Zip Cod	le
	named entity submits this staten ions of registered agent.	nent for the purp	ose of changing its	registere	ed office or	register	ed agent, or bot	h, in the Stal	e of Floric	la. I am	familiar with	and accept
		•										
SIGNATURE					•							
	Signature, typed or printed name of registere	id agent and title if app	dicable, (NOTE	: Registere	d Agent signatur	re required	when reinstating)			DATE		
	Signature, typed or printed name of registere	kt agent and title if app				re required	when reinstating)					
D	Filling Fee is \$61.25 ue by September 7, 200	· · · · · ·	9. Election Can Trust Fund C	npaign F	inancing	re required	\$5.00 May Boadded to Fees	9		e chec	k payable t	
D 10.	Filing Fee is \$61.25 ue by September 7, 200 OFFICERS AI	· · · · · ·	9. Election Can Trust Fund C	npaign F	inancing		\$5.00 May Bo Added to Fees	ANGES TO C	Florida	e checi a Depar	RECTORS IN	tate
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-5-05

850-562-8498

Daytime Phone #

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

		ANNUAL	. KEI	PURI		_		_	· · · · ·	16	WEN	r
1. Entity Nar	CUMENT # N02000009928 y Name BRIDGE OAKS OWNERS ASSOCIATION, INC.							-	.v. = 1 V	ł .		
Principal Place 4997-A O'N TALLAHASSI	IEL LN		499	o Address 7-A O'NIEL LN AHASSEE, FL 323	03			61	10	24:	299	
2. Principal f	Place of Busin	1853	3. Mai	ling Address				4.				ATTE
Sure, Apt	#, etc.		Su	ite, Apt. #, etc.			$\overline{}$	02022005	820	3.35	037 (10/03)	
City & Sta	te		Ci	ty & State				4. FEI Number APPLIED	FOR			optied For ot Applicable
Zip		Country	Zip Country			ιπιτγ		5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name	and Address of Current	Registers	id Agent				7, Name and A	ddress of Nev	v Registere	Agent	
PELHAM, 4997-A O' TALLAHA	NIEL LN	32303				Name Street A	ddress (i	P.O. Box Number	is Not Accepta	ible)	·	
						City				F	Zip Cod	e
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.							and accept					
SIGNATURE												
		e is \$61.25 tay 1, 2005		9. Election Carr Trust Fund C				\$5.00 May Be Added to Fees	1	lorida Dep	ck payable to artment of Si	tate
10.	, , .	OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHAN	GES TO OFFI	CERS AND		
TILE	DP \	RICHARD L		Cetete	TITLE		DP				Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	4997-A O				STRE	E Et adoress •St•Zip	150	las (am) • Fuller lla kasse	Ra C	· 3	2303	
TITLE	DST		-	☐ Delete	TITLE			114 44 25	*		Change	Addition
NAME Street adoress	PELHAM, 4997-A O	NIEL LN			NAME STRE	E Et address						
TITLE NAME STREET ADDRESS	DV SCHMID1 P.O.BOX			Delete	TITLE NAM STRE	E Et aooress					☐ Change	Addition
CITY-ST-ZIP TITLE MAME STREET AUDRESS CITY-ST-ZIP	IALLAHA	SSEE, FL 32318		☐ Deleta	TITLE NAM STRE						Change	☐ Addition
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TITLE HAME STREET ADDRESS CITY-ST-ZIP				□ Oelets							Change	Addition
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Ronga 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 cetth; that I am an officer or director of the corporation of the receiver or trustee empowered to secure 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 attenuent with an address, with all other like empowered.												
SIGNATURE: Dana Pelham 3/2/05 (850) 562 8498							3498					

- PADDAS	TIDAL INVESTMENT, INC. PH. 850-562-8498 FX. 850-562-4954 P.O. BOX 180070 TALLAHASSEE, FL 32318	of Store Bl	3/2/05	0316 63-1517/631
NO STATE 21 CAM	ORDER OF	of State, Fl		_] \$ 150.00
r Bron a	One Hundred Fifty and Bank MANAGERE NO 20000009928-Bainbri	dge Oaks HO	mary Q	Lace .
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