

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 20, 2007
Secretary of State

DOCUMENT# N05000001388

Entity Name: BRIDGEWATER ESTATES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4311 SW 63 AVE
DAVIE, FL 33314**New Principal Place of Business:**3057 SW 45TH STREET
DANIA BEACH, FL 33312**Current Mailing Address:**4311 SW 63 AVE.
DAVIE, FL 33314**New Mailing Address:**3057 SW 45TH STREET
DANIA BEACH, FL 33312**FEI Number:** 65-1148586**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PHEONIX MANAGEMENT SERVICES, INC,
4780 NORTH STATE RD
SUITE 250
LAUDERDALE LAKES, FL 33319 US**Name and Address of New Registered Agent:**GIA ARBOGAST
3071 SW 44TH STREET
DANIA BEACH, FL 33312 US

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: GIA ARBOGAST

11/20/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KRIEFF, RICHARD
Address: 4311 SW 63 AVE.
City-St-Zip: DAVIE, FL 33314

Title: VTD () Delete
Name: JOHNS, ROBERT W
Address: 4311 SW 63 AVE.
City-St-Zip: DAVIE, FL 33314

Title: SD () Delete
Name: JOHNS, JULIE
Address: 4311 SW 63 AVE.
City-St-Zip: DAVIE, FL 33314

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ABOUZLAM, SAM SAADEH
Address: 3051 SW 44 CT
City-St-Zip: DANIA BEACH, FL 33312

Title: VTD (X) Change () Addition
Name: FREEDMAN, BRUCE
Address: 3060 SW 44 CT
City-St-Zip: DANIA BEACH, FL 33312

Title: SD (X) Change () Addition
Name: BALE, ELLEN
Address: 3070 SW 44TH STREET.
City-St-Zip: DANIA BEACH, FL 33312

Title: D () Change (X) Addition
Name: BOGUE, CAROL
Address: 3051 SW 44TH STREET
City-St-Zip: DANIA BEACH, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAM ABOUZLAM

PRES

11/20/2007

Electronic Signature of Signing Officer or Director

Date