2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001388

Address:

City-St-Zip:

3051 SW 44TH STREET

DANIA BEACH, FL 33312

FILED Feb 24, 2008 Secretary of State

Entity Name: BRIDGEWATER ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3057 SW 45TH STREET DANIA BEACH, FL 33312 **Current Mailing Address: 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: Name and Address of New Registered Agent: GIA ARBOGAST FREEDMAN, BRUCE 3071 SW 44TH STREET 3060 SW 44 CT DANIA BEACH, FL 33312 DANIA BEACH, FL 33314 US 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: BRUCE FREEDMAN 02/24/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ABOUZLAM, SAM SAADEH Name: Name: 3051 SW 44 CT Address: Address: City-St-Zip: DANIA BEACH, FL 33312 City-St-Zip: Title: VTD (X) Delete Title: () Change () Addition Name: FREEDMAN, BRUCE Name: Address: 3060 SW 44 CT Address: City-St-Zip: DANIA BEACH, FL 33312 City-St-Zip: Title: SD (X) Delete Title: () Change () Addition BALE, ELLEN Name: Name: Address: 3070 SW 44TH STREET. Address: City-St-Zip: DANIA BEACH, FL 33312 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: BOGUE, CAROL Name:

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.

Address:

City-St-Zip:

SIGNATURE: S ABOUZLAM PRES 02/24/2008