


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90021 034 ****61.25

DOCUMENT # N05000010640

1. Entity Name
BRIGHTWATER POINT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**200 BRIGHTWATER DRIVE UNIT 2
 CLEARWATER BEACH, FL 33767**

Mailing Address
**1208 SOUTH MYRTLE AVENUE
 CLEARWATER, FL 33756**

40039356



2. Principal Place of Business - No P.O. Box #
4174 Woodlands Pkwy.

3. Mailing Address
4174 Woodlands Pkwy.

Suite, Apt. #, etc.

02052007 Chg-NP CR2E037 (12/06)

City & State
Palm Harbor, FL

City & State
Palm Harbor, FL.

Zip
34685

Country
U.S.A.

Zip
34685

Country
U.S.A.

4. FEI Number
APPLIED FOR

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**WARD, R. CARLTON
 1253 PARK STREET
 CLEARWATER, FL 33756**

7. Name and Address of New Registered Agent

Name
First Choice Association Mgmt.

Street Address (P.O. Box Number Is Not Acceptable)
4174 Woodlands Pkwy.

City
Palm Harbor

FL

Zip Code
34685

8. 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.

SIGNATURE  DATE **3/7/07**

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

Filing Fee is **\$61.25**
 Due by **May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHEPARD, PATRICK 200 BRIGHTWATER DRIVE UNIT 2 CLEARWATER BEACH, FL 33767 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HOWELL, HOWARD 701 SPOTTIS WOODS CLEARWATER, FL 33756 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ROGERS, ROLAND 200 BRIGHTWATER DRIVE UNIT 2 CLEARWATER BEACH, FL 33767 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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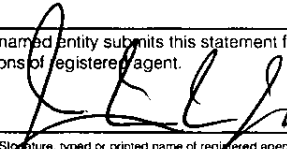
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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:  DATE: **3/14/07** DAYTIME PHONE #: **727-466-0484**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

ATTACHMENT

DOCUMENT # N05000010640			
1. Entity Name BRIGHTWATER POINT CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 200 BRIGHTWATER DRIVE UNIT 2 CLEARWATER BEACH, FL 33767		Mailing Address 1208 SOUTH MYRTLE AVENUE CLEARWATER, FL 33756	
2. Principal Place of Business - No P.O. Box # 4174 Woodlands Pkwy.		3. Mailing Address 4174 Woodlands Pkwy.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Palm Harbor, FL		City & State Palm Harbor, FL	
Zip 34685		Country U.S.A.	
4. FEI Number APPLIED FOR		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WARD, R. CARLTON 1253 PARK STREET CLEARWATER, FL 33756		7. Name and Address of New Registered Agent Name: First Choice Association Mgmt. Street Address (P.O. Box Number is Not Acceptable): 4174 Woodlands Pkwy. City: Palm Harbor FL Zip Code: 34685	
8. 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.			
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Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: DP <input type="checkbox"/> Delete NAME: SHEPARD, PATRICK STREET ADDRESS: 200 BRIGHTWATER DRIVE UNIT 2 CITY-ST-ZIP: CLEARWATER BEACH, FL 33767	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: DST <input type="checkbox"/> Delete NAME: HOWELL, HOWARD STREET ADDRESS: 701 SPOTTIS WOODS CITY-ST-ZIP: CLEARWATER, FL 33756	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME: STREET ADDRESS: CITY-ST-ZIP:
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SIGNATURE: _____			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date _____ Daytime Phone # _____	

40039356