## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000010640

FILED Jan 21, 2009 Secretary of State

Entity Name: BRIGHTWATER POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	ODLANDS PKY RBOR, FL 346			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
	ODLANDS PKY RBOR, FL 346			
FEI Number	r: <b>20-3639523</b>	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:
	ODLANDS PK			
PALM HA	RBOR, FL 346  e named entity		ourpose of changing its registere	ed office or registered agent, or both,
PALM HA The above	·		purpose of changing its registere	ed office or registered agent, or both,
PALM HA The above	e named entity e of Florida. RE:	submits this statement for the		
PALM HA The above in the Stat	e named entity e of Florida. RE:			ed office or registered agent, or both,  Date
PALM HA The above in the Stat SIGNATU	e named entity e of Florida. RE:	submits this statement for the labels and submits this statement for the labels and submits the submits and submits the submits and submits are submits and submit	ent	
PALM HA The above in the Stat SIGNATU	e named entity e of Florida.  RE: Electron S AND DIRECT P ( CASNER, PAU	submits this statement for the nic Signature of Registered Age TORS: ) Delete L ANDS PARKWAY	ent	Date
PALM HA The above in the Stat SIGNATU  OFFICER Title: Name: Address:	e named entity e of Florida.  RE:  Electron S AND DIRECT P ( CASNER, PAU 4174 WOODLA PALM HARBON DST ( HOWELL, HOW	submits this statement for the nic Signature of Registered Agerones:  TORS:  Delete L ANDS PARKWAY R, FL 34685  Delete WARD ANDS PARKWAY	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date ES TO OFFICERS AND DIRECTOR

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: JAMES NOLAN AGEN 01/21/2009