

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011344

**FILED**  
**Jan 05, 2007**  
**Secretary of State**

**Entity Name:** BRIDGEFORD CROSSING HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

255 WOODRIDGE DRIVE  
GENEVA, FL 32732

**New Principal Place of Business:**

650 S. CENTRAL AVENUE  
1000  
OVIEDO, FL 32765

**Current Mailing Address:**

255 WOODRIDGE DRIVE  
GENEVA, FL 32732

**New Mailing Address:**

650 S. CENTRAL AVENUE  
1000  
OVIEDO, FL 32765

FEI Number: 20-4115410

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLARK, SCOTT D  
655 W. MORSE BOULEVARD  
SUITE 212  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WHITE, KENNETH L  
Address: 255 WOODRIDGE DRIVE  
City-St-Zip: GENEVA, FL 32732

Title: VD ( ) Delete  
Name: RIGSBY, WILLIAM D  
Address: 255 WOODRIDGE DRIVE  
City-St-Zip: GENEVA, FL 32732

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WHITE, KENNETH L  
Address: 650 S. CENTRAL AVENUE, SUITE 1000  
City-St-Zip: OVIEDO, FL 32765

Title: VD (X) Change ( ) Addition  
Name: RIGSBY, WILLIAM D  
Address: 650 S. CENTRAL AVENUE, SUITE 1000  
City-St-Zip: OVIEDO, FL 32765

I hereby certify that the information supplied with this filing does not qualify for the 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: KENNETH L. WHITE

PD

01/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date