

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 26, 2009  
Secretary of State**

DOCUMENT# N06000002268

**Entity Name:** GARDENS OF BRIDGEHAMPTON CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8290 GATE PARKWAY WEST  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

8290 GATE PARKWAY WEST  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 20-4731925      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

PRESIDIO REALTY  
2909 W BAY TO BAY BLVD #202  
TAMPA, FL 33629 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: D ( ) Delete  
Name: BISHOP, JEAN  
Address: 8290 GATE PARKWAY WEST  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: HESS, MICHAEL  
Address: 8290 GATE PARKWAY WEST  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: TAYLOR, JOSIE  
Address: 8290 GATE PARKWAY WEST  
City-St-Zip: JACKSONVILLE, FL 32216

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEAN BISHOP

D

02/26/2009

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

\_\_\_\_\_  
Date