

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004180

FILED
Apr 18, 2008
Secretary of State

Entity Name: BRIDGE CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2496 INDIAN SPRINGS RD
MARIANNA, FL 32446

New Principal Place of Business:

5035 HIGHWAY 90 E.
MARIANNA, FL 32447

Current Mailing Address:

2496 INDIAN SPRINGS RD
MARIANNA, FL 32446

New Mailing Address:

P.O. BOX 728
MARIANNA, FL 32447

FEI Number: 22-3930032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRISON, C.C. III
2496 INDIAN SPRINGS RD
MARIANNA, FL 32446 US

Name and Address of New Registered Agent:

HARRISON, C.C. III
5035 HIGHWAY 90 E.
MARIANNA, FL 32446 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: C. C. HARRISON, III

04/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARRISON, C.C. III
Address: 2496 INDIAN SPRINGS RD
City-St-Zip: MARIANNA, FL 32446

Title: D () Delete
Name: TYUS, TED E
Address: 5194 OAK DR
City-St-Zip: MARIANNA, FL 32446

Title: D () Delete
Name: CHANCE, JOHN M
Address: 209 E EVANS AVE
City-St-Zip: BONIFAY, FL 32425

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HARRISON, C.C. III
Address: 5035 HIGHWAY 90 E.
City-St-Zip: MARIANNA, FL 32446

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: C. C. HARRISON, III

D

04/18/2008

Electronic Signature of Signing Officer or Director

Date