2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004180

FILED Aug 13, 2009 Secretary of State

Entity Name: BRIDGE CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5035 HIGHWAY 90 E. 10 RIVERVIEW DR. MARIANNA, FL 32447 STUART, FL 34996

Current Mailing Address: New Mailing Address:

P.O. BOX 728 10 RIVERVIEW DR. MARIANNA, FL 32447 STUART, FL 34996

FEI Number: 22-3930032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HARRISON, C.C. III GEARY, CHARLES E 5035 HIGHWAY 90 E. 10 RIVERVIEW DR. MARIANNA, FL 32446 US STUART, FL 34996 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: CHARLES E. GEARY 08/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: PRES (X) Change () Addition

 Name:
 HARRISON, C.C. III
 Name:
 GEARY, CHARLES E

 Address:
 5035 HIGHWAY 90 E.
 Address:
 10 RIVERVIEW DR.

 City-St-Zip:
 MARIANNA, FL 32446
 City-St-Zip:
 STUART, FL 34996

Title: D (X) Delete Title: () Change () Addition

 Name:
 TYUS, TED E
 Name:

 Address:
 5194 OAK DR
 Address:

 City-St-Zip:
 MARIANNA, FL 32446
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 CHANCE, JOHN M
 Name:

 Address:
 209 E EVANS AVE
 Address:

 City-St-Zip:
 BONIFAY, FL 32425
 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: CHARLES E. GEARY PRES 08/13/2009