

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15436

FILED
Feb 27, 2009
Secretary of State

Entity Name: BRIDGADETTE CLUB, INC.

Current Principal Place of Business:

811 LAKE MANN DRIVE
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

811 LAKE MANN DRIVE
ORLANDO, FL 32805

New Mailing Address:

FEI Number: 59-2889896

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDALL, MYRTLE J
988 SAINT GEORGE ST
ORLANDO, FL 32805 US

Name and Address of New Registered Agent:

DAVIS, LARONE
1990 ERVING CIRCLE #108
OCOOE, FL 34761 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: LARONE DAVIS

02/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RANDALL, MYRTLE J
Address: 988 SAINT GEORGE ST
City-St-Zip: ORLANDO, FL 32805

Title: T () Delete
Name: SMITH, LORRAINE V
Address: 6019 POWDER POST DR.
City-St-Zip: ORLANDO, FL 32810

Title: VD () Delete
Name: COOKE, TRECIE
Address: 408 DOMINO DR
City-St-Zip: ORLANDO, FL 32805

Title: C () Delete
Name: MORRISON, MARGESTINE
Address: 4267 OWENS ST.
City-St-Zip: ORLANDO, FL 32811

Title: S () Delete
Name: BROOKS, GERALDINE S
Address: 1400 PRINCE PHILLIP DR
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: PRICE, RUTH
Address: 811 W. LAKE MANN DR
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, LARONE
Address: 1990 ERVING CIRCLE #108
City-St-Zip: OCOOE, FL 34761

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

Title: VD (X) Change () Addition
Name: SMITH, DOROTHY
Address: 6233 BRISTOL CHANNEL WAY
City-St-Zip: ORLANDO, FL 32829

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

Title: S (X) Change () Addition
Name: BROWNING, LINDA
Address: 4039 BARNLSEY DR
City-St-Zip: ORLANDO, FL 32812

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: LORRAINE SMITH

T

02/27/2009

Electronic Signature of Signing Officer or Director

Date