FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -6 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N16331 (3)

1. Corporation Name

BRIDGEWATER HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% MAY MANAGEMENT SERVICES, INC 10036 SAWGRASS DRIVE, SUITE 1 PONTE VEDRA BEACH FL 32082	% MAY MANAGEMENT SERVICES, INC 10036 SAWGRASS DRIVE, SUITE 1 PONTE VEDRA BEACH FL 32082

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/12/1986	3a. Date of Last Report: 04/20/1994
4. FEI Number: 59-2865385	☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required

8. ~~This corporation has liability for intangible tax under S. 199.032,~~ Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ARENAS, PAT
MAY MANAGEMENT SERVICES, INC.
10036 SAWGRASS DRIVE, SUITE 1
PONTE VEDRA BCH FL 32082

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	STD
NAME	DAVEY, FRANCES
STREET ADDRESS	6012 BRIDGEWATER CIRCLE
CITY ST ZIP	PONTE VEDRA BEACH FL
TITLE	PD
NAME	BRAZEAL, RANDALL
STREET ADDRESS	6003 BRIDGEWATER CIR
CITY ST ZIP	PONTE VEDRA BCH FL
TITLE	D
NAME	RELLAHAN, DR. MARY
STREET ADDRESS	6021 BRIDGEWATER CIRCLE
CITY ST ZIP	PONTE VEDRA BEACH FL
TITLE	D
NAME	HORTON, BRIAN
STREET ADDRESS	6033 BRIDGEWATER CIRCLE
CITY ST ZIP	PONTE VEDRA BEACH FL
TITLE	VD
NAME	HARTMAN, JOAN
STREET ADDRESS	6010 BRIDGEWATER CIR
CITY ST ZIP	PONTE VEDRA BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	PD	☒ Change ☐ Addition
1 2 NAME	George McQuillen	
1 3 STREET ADDRESS	6005 Bridgewater Circle	
1 4 CITY ST ZIP	Ponte Vedra Beach FL 32082	
2 1 TITLE	VD	☐ Change ☒ Addition
2 2 NAME	William Smith	
2 3 STREET ADDRESS	6031 Bridgewater Circle	
2 4 CITY ST ZIP	Ponte Vedra Beach FL 32082	
3 1 TITLE	D	☐ Change ☒ Addition
3 2 NAME	Dorothy Galloway	
3 3 STREET ADDRESS	6013 Bridgewater Circle	
3 4 CITY ST ZIP	Ponte Vedra Beach FL 32082	
4 1 TITLE		☐ Change ☐ Addition
4 2 NAME		
4 3 STREET ADDRESS		
4 4 CITY ST ZIP		
5 1 TITLE		☐ Change ☐ Addition
5 2 NAME		
5 3 STREET ADDRESS		
5 4 CITY ST ZIP		
6 1 TITLE		☐ Change ☐ Addition
6 2 NAME		
6 3 STREET ADDRESS		
6 4 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] George McQuillen, Pres/Dir 904-273-9832

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000208