

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27052

FILED
Mar 11, 2009
Secretary of State

Entity Name: BRIDGEWATER AT PLANTATION COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

11784 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

11784 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

New Mailing Address:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0101973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGMT, CORP
11784 WEST SAMPLE RD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MGMT, CORP
11784 WEST SAMPLE RD
#103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WALSH, KENNETH
Address: 10557 NW 10 CT
City-St-Zip: PLANTATION, FL 33322

Title: SD () Delete
Name: RABIN, BEN
Address: 10370 NW 11 ST
City-St-Zip: PLANTATION, FL 33322

Title: D () Delete
Name: OAKLEY, JUSTIN
Address: 10310 NW 11 ST
City-St-Zip: PLANTATION, FL 33322

Title: PD () Delete
Name: DAVIS, ARNOLD
Address: 1121 NW 106 AVE.
City-St-Zip: PLANTATION, FL 33322

Title: VPD () Delete
Name: SCHREIBER, ALAN
Address: 1100 NW 111 AVE
City-St-Zip: FORT LAUDERDALE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: DUKE, OWEN
Address: 10301 NW 11TH STREET
City-St-Zip: PLANTATION, FL 33322

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

Title: D (X) Change () Addition
Name: OLSHANSKY, JACK
Address: 10542 NW 10TH STREET
City-St-Zip: PLANTATION, FL 33322

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: MARY LOU PALMER

AGT

03/11/2009

Electronic Signature of Signing Officer or Director

Date