## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 17 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## POCUMENT # N97000002526 (8)

1. Corporation	on Name	0002320 (8)				
BRIDG	GE BUILDERS DEVELOPMEN	T, INC.				
					. <b>e</b> gue 11 <b>00</b> , 6776 (1 <b>07</b> 6 áirí 1 <b>6</b> 7	
Principal Plac	ce of Business	Mailing Address			i mening nyaéh banya mahib banil yah	11
, .		ū				
906 NORTH 13TH STREET POST OFFICE BOX 2384  FT. PIERCE FL 34950 FT. PIERCE FL 34954				3. Date Incorporated or Qualified		}
1		. 1. 1 16/102 16 91971		<b>05/06/1997</b> 4. FEI Number	<del> </del>	
\$					Applied For	
2. Principal F	Place of Business	2a. Mailing Address		65-0756203	Not Applica	≺
21 906		26 P.O. BOX	2384	5. Certificate of Status Desired	\$8.75 Additional Fee Required	'
Suite, Apt.	#, etc.,	Suite, Apt. #, etc.	<u> </u>	6. Election Campaign Financing	\$5.00 May Be	$\dashv$
22	N/A	27 N/A		Trust Fund Contribution	Added to Fees	j
City & State	PIERCE FL	City & State  28 FT. PIER	CE FL	7. Is this nonprofit corporation a homeowr	ners association?	
Zip	Country	Zip	Country	6. This corporation owes or has paid the o	current year Intangible	ヿ
24 349	910 25 U.S.A		30 U.S.A	Personal Property Tax due June 30.	Yes No	
L	9. Name and Address of Current	Registered Agent	041 31	10. Name and Address of New Registers	d Agent	
			81 Name			1
	T, JEROME		82 Street Ad	dress (P.O. Box Number is Not Acceptable)		$\neg$
	EATHERBEE ROAD		83	7		
j FT. PIEI	RCE FL 34982		63			
			84 City	F	85 Zip Code	$\neg$
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statuter	s, the above-named co			ed
office or agent 1 a	registered agent, or both, in the State o am familiar with, and accept the obliga:	of Florida, Such change was au tions of, Section 617.0503, Flor	uthorized by the corpor ida Statutes.	orporation submits this statement for the purpose ation's board of directors. I hereby accept the a	ppointment as registere	a
SIGNATURE					_	1
	Signature, typed or prioted name of registered agen		Registered Agent signature req	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	IN DIDECTORS IN 12	_{
12.	OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AF	Change Addit	
NAME	RHYANT, JEROME D		1.2 NAME			
STREET ADDRESS	350 WEATHERBEE ROAD		1.3 STREET ADDRESS			- 1
CITY-ST-ZIP	FT. PIERCE FL 34982		1.4 CITY-ST-ZIP			- 1
TIFLE	7	DELETE	2.1 IIILE	- 14	Change Addit	tion
NAME	RHYANT, SHARWYN T	_	2.2 NAME		<u>-</u>	•
STREET ADDRESS	350 WEATHERBEE ROAD		2 3 STREET ADDRESS			
CITY-ST-7IP	FT. PIERCE FL 34982		2 4 City-St-ZiP			_ }
TITLE	8	DELETE	3.1 TITLE		Change Addi	lion
NAME	SKINNER, SHARON		3.2 NAME			[
STREET ADORESS	2495 S.E. BETTY ROAD		3.3 STREET ADDRESS			İ
CITY-ST-ZIP	PORT ST. LUCIE FL 34987		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addit	tion
KAME	l		4. 2 NAME			- 1
STREET ADDRESS			4.3 STREET ADDRESS			-
CITY-ST-ZIP	ļ	I Decree	4.4 CITY - ST - ZIP		Donne Didde	tian
TITLE		DELETE	5 1 TITLE		Change Addit	IIOII
NAME			5.2 NAME			
STREET ADORESS	}		5.3 STREET ADDRESS			
CITY-\$T-ZIP	<b></b>	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addit	ition
TITLE NAME		L. DUCCIL	6.2 NAME		L. Johnings L. Modil	
	1					į
CITY-ST-7IP			6.3 STREET ADDRESS			-
STREET ADDRESS			6.3 STREET ADDRESS			1
CITY-ST-7IP	Į.		6 & CITY - ST - ZIP			

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: (JERUME RHYANT) Secure Was 1/12/98 56/-460-2945