2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P02000102415

BOARDWALK AT MORRIS BRIDGE I, INC.



Principal Place of Business

Mailing Address

3600 N.W. 43RD STREET

3600 N.W. 43RD STREET

SUITE C-1 GAINESVILLE, FL 32606-8127 SUITE C-1 GAINESVILLE, FL 32606-8127

FILED Apr 16, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

03132007 No Chg-P CR2E034 (11/05)

4. FEI Number 43-2003192

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIOTRKOWSKI, JOEL S

DO NOT WRITE

MIAMI BEACH, FL 33141		IN THIS SPACE		
The above named entity submits this statement for the parties obligations of registered agent.	ourpose of changing its registered	d office or re	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	04/24/07-80151-020 158.75
10. OFFICERS AND DIRECT ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	CTORS	DO NOT WRITE IN THIS SPACE		
CHY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-SI-ZIP				40 Florida Character Market Character Characte

indicated on this report or supplied with this filling does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #