

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000004844

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: BAINBRIDGE LAKE BETTY, INC.

## Current Principal Place of Business:

12765 W. FOREST HILL BLVD., STE. 1307  
WELLINGTON, FL 33414

## New Principal Place of Business:

## Current Mailing Address:

12765 W. FOREST HILL BLVD., STE. 1307  
WELLINGTON, FL 33414

## New Mailing Address:

FEI Number: 20-4121925      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JEFFREY A. DEUTCH, P.A.  
7777 GLADES RD., STE. 300  
BOCA RATON, FL 33434 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SCHECHTER, RICHARD A.  
Address: 12765 W. FOREST HILL BLVD., STE. 1307  
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete  
Name: MEAD, SHEILA A.  
Address: 14601 PALOMINO DR.  
City-St-Zip: FT. LAUDERDALE, FL 33330

Title: D ( ) Delete  
Name: BANKS, GEORGE  
Address: 13808 FAIRLANE CT.  
City-St-Zip: WEST PALM BEACH, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS KEADY

MBR

04/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date