2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2009
Secretary of State

DOCUMENT# P07000096399

Entity Name: BLUEWATER PROPERTIES OF BREVARD, INC.

Current Principal Place of Business:

5848 DUSKYWING DRIVE
ROCKLEDGE, FL 32955

New Principal Place of Business:

3282 SIDERWHEEL DRIVE`
ROCKLEDGE, FL 32955

Current Mailing Address:

5848 DUSKYWING DRIVE
ROCKLEDGE, FL 32955

New Mailing Address:

3282 SIDERWHEEL DRIVE`
ROCKLEDGE, FL 32955

FEI Number: 26-0801968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLOTZ, JERRY F
5848 DUSKYWING DRIVE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

FRANCE, GAIL
3282 SIDERWHEEL DRIVE
ROCKLEDGE, FL 32955 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: GAIL FRANCE 02/17/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GLOTZ, JERRY F
Address: 5848 DUSKYWING DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP ( ) Delete
Name: GLOTZ-FRANCE, GAIL
Address: 5848 DUSKYWING DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: SEC (X) Delete
Name: GLOTZ, JESSICA
Address: 5848 DUSKYWING DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: TREA (X) Delete
Name: FRANCE, MARC M
Address: 5848 DUSKYWING DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/TR (X) Change ( ) Addition
Name: FRANCE, GAIL
Address: 3282 SIDERWHEEEL DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP/S (X) Change ( ) Addition
Name: FRANCE, MARC
Address: 3282 SIDERWHEEL DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

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: GAIL FRANCE PRES 02/17/2009
Electronic Signature of Signing Officer or Director Date