

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000008662

Entity Name: BRIDGEWATER MIDDLE SCHOOL PARENT TEACHER
STUDENT ORGANIZATION INC**Current Principal Place of Business:**5600 TINY ROAD
WINTER GARDEN, FL 34787**Current Mailing Address:**5600 TINY ROAD
WINTER GARDEN, FL 34787**FEI Number: 47-4647780****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BENNER, JANE
5600 TINY ROAD
WINTER GARDEN, FL 34787 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	ALLEN, DEBRA
Address	5600 TINY ROAD
City-State-Zip:	WINTER GARDEN FL 34787

Title	VP
Name	BENTON, JENNIFER
Address	5600 TINY ROAD
City-State-Zip:	WINTER GARDEN FL 34787

Title	VP
Name	VANOVER, TRISHA
Address	5600 TINY ROAD
City-State-Zip:	WINTER GARDEN FL 34787

Title	T
Name	BENNER, JANE
Address	5600 TINY ROAD
City-State-Zip:	WINTER GARDEN FL 34787

Title	S
Name	MARCOCCIA, CHALI
Address	5600 TINY ROAD
City-State-Zip:	WINTER GARDEN FL 34787

Title	S
Name	FINK, LAURA
Address	5600 TINY ROAD
City-State-Zip:	WINTER GARDEN FL 34787

I hereby 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 all other like empowered.

SIGNATURE: JANE BENNER**TREASURER****05/08/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date