

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90033 013 ****61.25

DOCUMENT # N04000012063

1. Entity Name
BRIDGES OF AMERICA-THE JACKSONVILLE BRIDGE, INC.



Principal Place of Business
**2011 MERCY DR
ORLANDO, FL 32808-5629**

Mailing Address
**2011 MERCY DR
ORLANDO, FL 32808-5629**

60015864



2. Principal Place of Business

2001 mercy Drive

Suite, Apt. #, etc.

Suite 101

City & State

Orlando, FL

Zip
32808

Country

US

3. Mailing Address

2001 mercy Drive

Suite, Apt. #, etc.

Suite 101

City & State

Orlando, FL

Zip
32808

Country

US

01032006 Chg-NP CR2E037 (11/05)

4. FEI Number
20-2062312

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LOWMAN, WILLIAM R JR
1000 LEGION PLACE SUITE 1700
ORLANDO, FL 32801**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
COSTANTINO, FRANK
2011 MERCY DR
ORLANDO, FL 328085629 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCMURTY, GRADY
4698 HALL ROAD
ORLANDO, FL 32817 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
POITREAS, EDWARD W
27 LAKE HAMILTON BEACH
HAINES CITY, FL 33844 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BROWN, DONALD
625 WHIP-O-WILL LANE
ST CLOUD, FL 34771 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HARRISON, BEN
PO BOX 279
BRYSON CITY, NC 28713 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CONSTANTINO-BROWN, LORI
2011 MERCY DR
ORLANDO, FL 328085629 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Costantino, Bishop Frank
2001 mercy Drive Suite 101
Orlando, FL 32808 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Patricia Madhouse
2001 mercy Drive Suite 101
Orlando, FL 32808 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Poitras, Edward W
27 Lake Hamilton Beach
Haines City, FL 33844 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Brown, Charles
2001 mercy Drive Suite 101
Orlando, FL 32808 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Costantino-Brown, Lori
2001 mercy Drive, Suite 101
Orlando, FL 32808 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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 617, 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 information.

SIGNATURE:

Lori Costantino

2/13/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

ATTACHMENT
BRIDGES OF

60015864
#N04000012063

BISHOP FRANK COSTANTINO
PRESIDENT



"A Wholistic Twelve Step Treatment Program"

February 13, 2006

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed please find our 2006 Not-for-Profit Corporation Annual Reports. Last year we made changes that were not reflected on these reports.

Please insure that all changes are made accordingly.

Thank you.

Marvel Quevedo

Controller