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CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 14 PM 2:27

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1. Corporation Name

BRIDGES OF AMERICA - THE LAUDERHILL BRIDGE, INC.

Principal Place of Business

2100 BRENGLE AVE  
ORLANDO FL 32808-5629

Mailing Address

2100 BRENGLE AVE  
ORLANDO FL 32808-5629

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
05/13/1994

3a. Date of Last Report

4. FEI Number  
65-0499167

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

21

2a. Mailing Address

2a

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

COSTANTINO, FRANK  
2100 BRENGLE AVE  
ORLANDO FL 32808-5629

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME COSTANTINO, FRANK  
STREET ADDRESS 2030 PEACHTREE RD-  
CITY- ST- ZIP ST CLOUD FL 32769

1.1 TITLE  Change  Addition

TITLE D  
NAME MCMURTRY, GRADY  
STREET ADDRESS 4698 HALL RD  
CITY- ST- ZIP ORLANDO FL 32817

1.2 NAME

1.3 STREET ADDRESS 5519 Bayside Drive  
1.4 CITY- ST- ZIP Orlando FL 32819

2.1 TITLE  Change  Addition

TITLE D  
NAME KELLY, MIKE-  
STREET ADDRESS 3086 CAMELOT BLVD-  
CITY- ST- ZIP ST CLOUD FL 34772

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

TITLE D  
NAME POITRAS, EDWARD W  
STREET ADDRESS 27B MOORE RD  
CITY- ST- ZIP HAINES CITY FL 33844

TITLE D  
NAME HARRISON, BEN  
STREET ADDRESS P O BOX 1189 RT 1  
CITY- ST- ZIP CLERMONT FL 32711

TITLE D  
NAME BROWN, DON  
STREET ADDRESS 1375 COUNTY RD 565A  
CITY- ST- ZIP CLERMONT FL 34711

14. I do hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 its receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

*Frank Costantino*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR