


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

02-15-2006 90033 025 ****61.25

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



60015852



01032006 Chg-NP CR2E037 (11/05)

Principal Place of Business
 2011 MERCY DRIVE
 ORLANDO, FL 32808-5629 US

Mailing Address
 2011 MERCY DRIVE
 ORLANDO, FL 32808-5629 US

2. Principal Place of Business
 2001 Mercy Drive
 Suite, Apt. #, etc.
Suite 101

3. Mailing Address
 2001 Mercy Drive
 Suite, Apt. #, etc.
Suite 101

City & State
Orlando, FL

City & State
Orlando, FL

4. FEI Number
65-0499167

Applied For
 Applied For
 Not Applicable

Zip
32808

Country
US

Zip
32808

Country
US

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

6. Name and Address of Current Registered Agent

COSTANTINO, FRANK
 2011 MERCY DRIVE
 ORLANDO, FL 32808-5628

7. Name and Address of New Registered Agent

Name
Costantino, Bishop Frank

Street Address (P.O. Box Number is Not Acceptable)
2001 Mercy Drive

Suite 101

City
Orlando

FL Zip Code
32808

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 BISHOP 2011 MERCY DRIVE ORLANDO, FL 32808	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCMURTRY, GRADY 4698 HALL RD ORLANDO, FL 32817	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POITRAS, EDWARD W 27 LAKE HAMILTON BEACH HAINES CITY, FL 33814	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRISON, BEN P.O. BOX 27 BRYSON CITY, NC 28713	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, DON 625 WHIP-O-WILL LANE ST. CLOUD, FL 34777	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTANTINO-BROWN, LORI 2011 MERCY DRIVE ORLANDO, FL 32808	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Costantino, Bishop Frank 2001 Mercy Drive, Suite 101 Orlando, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition madouse, Patricia 2001 Mercy Drive, Suite 101 Orlando, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Brown, Charles 2001 Mercy Drive, Suite 101 Orlando, FL 32808
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Costantino-Brown, Lori 2001 Mercy Drive, Suite 101 Orlando, FL 32808

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 like empowered.

SIGNATURE: Lori Costantino 2/16/06
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
BRIDGES OF

60015882
094000002419

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