

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727347

**Entity Name:** BRIDGEWOOD MID-RISE CONDOMINIUM I ASSOCIATION, INC.

**FILED**  
**Apr 16, 2024**  
**Secretary of State**  
**0702971096CC**

**Current Principal Place of Business:**

2400 BRIDGEWOOD DR  
BOCA RATON, FL 33434

**Current Mailing Address:**

2400 BRIDGEWOOD DR  
BOCA RATON, FL 33434

**FEI Number: 59-1508070**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

STEVEN RUBIN, ESQUIRE  
980 NORTH FEDERAL HIGHWAY  
SUITE 440  
BOCA RATON, FL 33432 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: STEVEN RUBIN**

**04/16/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name FLINKMAN, DOLORES  
Address 1771 BRIDGEWOOD DRIVE  
City-State-Zip: BOCA RATON FL 33434

Title PRESIDENT  
Name MARIE, MCALLISTER  
Address 1563 BRIDGEWOOD DRIVE  
City-State-Zip: BOCA RATON FL 33434

Title TREASURER  
Name RICHARD, FRANK  
Address 1675 BRIDGEWOOD DRIVE  
City-State-Zip: BOCA RATON FL 33434

Title 1ST VICE PRESIDENT  
Name TROCCOLO, CAROLYN  
Address 1734 BRIDGEWOOD DRIVE  
City-State-Zip: BOCA RATON FL 33434

Title SECRETARY  
Name HAIMES, SAMANTHA  
Address 1572 BRIDGEWOOD DRIVE  
City-State-Zip: BOCA RATON FL 33434

*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: MARIE MCALLISTER**

**PRESIDENT**

**04/16/2024**

Electronic Signature of Signing Officer/Director Detail

Date