

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753946

**Entity Name:** BLOOMINGDALE NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**3509 BELL SHOALS RD.  
VALRICO, FL 33596**Current Mailing Address:**3509 BELL SHOALS RD.  
VALRICO, FL 33596 US**FEI Number:** 59-2586385**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLOOMINGDALE HOMEOWNERS ASSOCIATION  
3509 BELL SHOALS RD.  
VALRICO, FL 33596 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:** BLOOMINGDALE HOMEWONERS ASSOCIATION

03/06/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	WATTS, SUZAN
Address	3509 BELL SHOALS RD.
City-State-Zip:	VALRICO FL 33596

Title	TREASURER
Name	LEWIS, GRACE
Address	3509 BELL SHOALS RD.
City-State-Zip:	VALRICO FL 33596

Title	VP
Name	DONAHUE, SEAN
Address	3509 BELL SHOALS ROAD
City-State-Zip:	VALRICO FL 33596

Title	OFFICE MANAGER
Name	JANKOWITZ, DONNA
Address	3509 BELL SHOALS ROAD
City-State-Zip:	VALRICO FL 33596

*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:** DONNA JANKOWITZ**OFFICE MANAGER**

03/06/2023

Electronic Signature of Signing Officer/Director Detail

Date