

2022 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

03/02/2022

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**

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date