

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766123

Entity Name: BRIDGEVIEW ASSOCIATION, INC.

Current Principal Place of Business:

5199 PRIVET PLACE
DELRAY BEACH, FL 33484

Current Mailing Address:

5199 PRIVET PLACE
DELRAY BEACH, FL 33484

FEI Number: 59-2342115

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEBOEST, RICHARD II ESQ
C/O GOEDE, ADAMCZYK & DEBOEST PLLC
2030 MCGREGOR BOULEVARD
FORT MYERS, FL 33901 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name IZZO, SYLVIA P
Address 5284-B PRIVET PL
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT
Name SANDVOSS, KEN
Address 5432-B PRIVET PL
City-State-Zip: DELRAY BCH. FL 33484

Title DIRECTOR
Name MATTIA, LORRAINE
Address 5474-D PRIVET PL.
City-State-Zip: DELRAY BEACH FL 33484

Title DIRECTOR
Name URSILLO, JEFF
Address 5400-A POPPY PL.
City-State-Zip: DELRAY BEACH FL 33484

Title DIR
Name TOBACK, BUD
Address 5094-A PRIVET PL
City-State-Zip: DELRAY BEACH FL 33484

Title DIR
Name KINGSLEY, GEORGE
Address 5322-B POPPY PL
City-State-Zip: DELRAY BEACH FL 33484

Title VP
Name POLLITT, BOB
Address 5269-D POPPY PL
City-State-Zip: DELRAY BEACH FL 33484

Title SECRETARY
Name ERLICH, ARTHUR
Address 5326-B PRIVET PL
City-State-Zip: DELRAY BEACH FL 33484

Continues on page 2

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: KEN SANDVOSS

PRESIDENT

03/17/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CONIGLIARO, JOE
Address 5321 POPPY PL. #104
City-State-Zip: DELRAY BEACH FL 33484