

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12232

Entity Name: BRIDGE HOPE STABILIZATION PROGRAMS INC**Current Principal Place of Business:**4685 - 95TH STREET N
SUITE A
ST. PETERSBURG, FL 33708**Current Mailing Address:**P. O. BOX 86688
MADEIRA BEACH, FL 33738 US**FEI Number:** 59-2882563**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CRONIN, MICHAEL
911 CHESTNUT STREET
CLEARWATER, FL 33756 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:** MICHAEL CRONINI

01/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT, DIRECTOR
Name FUCHS, RANDY L
Address 4333 NEWBURY DR
City-State-Zip: NEW PORT RICHEY FL 34652Title S, DIRECTOR
Name FISCHER, JENNIFER L
Address 13655 GULF BLVD
City-State-Zip: MADEIRA BEACH FL 33708Title T, DIRECTOR
Name KELLEY, NAKIA
Address 303 MAIN STREET
#201
City-State-Zip: SAFETY HARBOR FL 34691Title DIRECTOR
Name SMITH, JAMIE
Address 2732 HIGHLANDS BLVD
#C
City-State-Zip: PALM HARBOR FL 34684

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: NAKIA KELLEY

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01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date