

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005961

**FILED**  
**Apr 29, 2014**  
**Secretary of State**  
**CC5832588607**

**Entity Name:** BRIDGES OF AMERICA - THE SANTA FE BRIDGE, INC.

**Current Principal Place of Business:**

2001 MERCY DRIVE  
ORLANDO, FL 32808

**Current Mailing Address:**

2001 MERCY DRIVE  
ORLANDO, FL 32808

**FEI Number:** 46-3089562

**Certificate of Status Desired:** No

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

BOYLES, WILLIAM A  
301 E. PINE STREET, SUITE 1400  
ORLANDO, FL 32801 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 DIRECTOR, PRESIDENT/CEO  
Name COSTANTINO-BROWN, LORI  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR, SENIOR VICE PRESIDENT  
Name BROWN, CHARLES  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR, SECRETARY  
Name MCMURTRY, GRADY S  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR, TREASURER, ASSISTANT SECRETARY  
Name PENNINGTON, SAM  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR  
Name SMITH, MICHAEL  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR EMERITUS  
Name POITRAS, TED  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR, VP  
Name DENMARK, CECILIA  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

Title DIRECTOR  
Name GAINES, THOMAS  
Address 2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808

**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:** LORI COSTANTINO-BROWN

**PRESIDENT/CEO**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            HOLDSWORTH, GERALD  
Address        2001 MERCY DRIVE  
City-State-Zip: ORLANDO FL 32808