

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000007791

**Entity Name:** BRIDGES INTERNATIONAL CENTERS FOR RECOVERY AND REENTRY, INC.

**FILED**  
**Feb 20, 2024**  
**Secretary of State**  
**4566270079CC**

**Current Principal Place of Business:**

2001 MERCY DRIVE  
ORLANDO, FL 32808

**Current Mailing Address:**

2001 MERCY DRIVE  
ORLANDO, FL 32808 US

**FEI Number: 82-2321125**

**Certificate of Status Desired: No**

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

COSTANTINO-BROWN, LORI  
2001 MERCY DRIVE  
ORLANDO, FL 32808 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:** LORI COSTANTINO-BROWN

02/20/2024

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

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

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

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

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

*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**

02/20/2024

Electronic Signature of Signing Officer/Director Detail

Date