2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000011839

Entity Name: BRIDGES FEDERAL REINTEGRATION CENTERS, INC.

Current Principal Place of Business:

2001 MERCY DRIVE ORLANDO, FL 32808

Current Mailing Address:

2001 MERCY DRIVE ORLANDO, FL 32808 US

FEI Number: 83-2338123

Name and Address of Current Registered Agent:

COSTANTINO-BROWN, LORI 2001 MERCY DRIVE ORLANDO, FL 32808 US

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	VPD
Name	COSTANTINO-BROWN, LORI	Name	BROWN, CHARLES
Address	2001 MERCY DRIVE	Address	2001 MERCY DRIVE
City-State-Zip:	ORLANDO FL 32808	City-State-Zip:	ORLANDO FL 32808
Title	SD	Title	TD
Name	MCMURTRY, GRADY S	Name	HOLDSWORTH, GERALD
Address	2001 MERCY DRIVE	Address	2001 MERCY DRIVE
City-State-Zip:	ORLANDO FL 32808	City-State-Zip:	ORLANDO FL 32808
		Titlo	
Title	D, VP	Title	D, VP
Title Name	D, VP DORSEY, YOLANDA	Title Name	D, VP DENMARK, CECILIA
	,		,
Name	DORSEY, YOLANDA	Name	DENMARK, CECILIA
Name Address City-State-Zip:	DORSEY, YOLANDA 2001 MERCY DRIVE ORLANDO FL 32808	Name Address City-State-Zip:	DENMARK, CECILIA 2001 MERCY DRIVE ORLANDO FL 32808
Name Address	DORSEY, YOLANDA 2001 MERCY DRIVE	Name Address	DENMARK, CECILIA 2001 MERCY DRIVE
Name Address City-State-Zip:	DORSEY, YOLANDA 2001 MERCY DRIVE ORLANDO FL 32808	Name Address City-State-Zip:	DENMARK, CECILIA 2001 MERCY DRIVE ORLANDO FL 32808
Name Address City-State-Zip: Title	DORSEY, YOLANDA 2001 MERCY DRIVE ORLANDO FL 32808 D	Name Address City-State-Zip: Title	DENMARK, CECILIA 2001 MERCY DRIVE ORLANDO FL 32808 DIRECTOR
Name Address City-State-Zip: Title Name Address	DORSEY, YOLANDA 2001 MERCY DRIVE ORLANDO FL 32808 D MCCLELLAND, JAMES	Name Address City-State-Zip: Title Name	DENMARK, CECILIA 2001 MERCY DRIVE ORLANDO FL 32808 DIRECTOR TATE, JON

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

01/23/2023

Electronic Signature of Signing Officer/Director Detail