#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50274

Entity Name: BRIDGES OF AMERICA-THE ORLANDO BRIDGE, INC.

FILED Apr 29, 2019 Secretary of State 1435825678CC

## **Current Principal Place of Business:**

2145 METROCENTER BLVD., STE. 350 ORLANDO. FL 32835

### **Current Mailing Address:**

2145 METROCENTER BLVD., STE. 350 ORLANDO, FL 32835 US

FEI Number: 58-2013044 Certificate of Status Desired: No

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

COSTANTINO-BROWN, LORI A. 2145 METROCENTER BLVD. SUITE 300 ORLANDO, FL 32835 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

04/29/2019

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	DIRECTOR, SENIOR VICE PRESIDENT	Title	DIRECTOR, SECRETARY
Name	BROWN, CHARLES	Name	MCMURTRY, GRADY

Address 2145 METROCENTER BLVD., STE. 350 Address 2145 METROCENTER BLVD., STE. 350

City-State-Zip: ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32835

Title DIRECTOR, PRESIDENT/CEO Title DIRECTOR

Name COSTANTINO-BROWN, LORI Name PENNINGTON, SAM

Address 2145 METROCENTER BLVD., STE. 350 Address 2145 METROCENTER BLVD., STE. 350

City-State-Zip: ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32835

TitleDIRECTORTitleDIRECTOR, TREASURERNameGAINES, THOMASNameHOLDSWORTH, GERALD

Address 2145 METROCENTER BLVD., STE. 350 Address 2145 METROCENTER BLVD., STE. 350

City-State-Zip: ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32835

 Title
 DIRECTOR
 Title
 DIRECTOR, VP

 Name
 DENMARK, CECILIA
 Name
 DORSEY, YOLANDA

Address 2145 METROCENTER BLVD., STE. 350 Address 2145 METROCENTER BLVD., STE. 350

City-State-Zip: ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32835

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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

PESIDENT/CEO

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name MCCLELLAND, JAMES

Address 2145 METROCENTER BLVD., STE. 350

City-State-Zip: ORLANDO FL 32835