

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000002886

**Entity Name:** BLOOMINGDALE - BL HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

CENTENNIAL FALCON DRIVE  
VALRICO, FL 33595

**Current Mailing Address:**

P.O. BOX 462  
VALRICO, FL 33595 US

**FEI Number:** 59-3596345

**Certificate of Status Desired:** No

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

OSENTON, O. REGINALD ESQ.  
500 LITHIA PINECREST ROAD  
BRANDON, FL 33511 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 T  
Name DEFONTAINE, KRISTIE A  
Address 2531 CENTENNIAL FALCON DRIVE  
City-State-Zip: VALRICO FL 33596

Title P.  
Name HALE, KELLY  
Address 2515 CENTENNIAL FALCON DRIVE  
City-State-Zip: VALRICO FL 33596

Title VP  
Name DUPONT, THOM  
Address 2513 CENTENNIAL FALCON DRIVE  
City-State-Zip: VALRICO FL 33596

Title S  
Name BARTON, CHERYL MS  
Address 2517 CENTENNIAL FALCON DRIVE  
City-State-Zip: VALRICO FL 33596

*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:** KRISTIE DEFONTAINE

**TREASURER**

**04/08/2013**

Electronic Signature of Signing Officer/Director Detail

Date