

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768519

FILED
Jan 04, 2012
Secretary of State

Entity Name: BRIDGES BTC FOUNDATION, INC.

Current Principal Place of Business:

1694 CEDAR ST.
ROCKLEDGE, FL 329553131

New Principal Place of Business:

Current Mailing Address:

1694 CEDAR ST.
ROCKLEDGE, FL 329553131

New Mailing Address:

FEI Number: 59-2295584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOKE, DAVID
1694 CEDAR STREET
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: BRINK, BART
Address: 25 MCLEOD STREET
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: C
Name: ELMORE, SUSAN
Address: 3940 ALAN SHEPARD AVENUE
City-St-Zip: COCOA, FL 32926 US

Title: T
Name: MORGAN, RONALD B
Address: P.O. BOX 540998
City-St-Zip: MERRITT ISLAND, FL 32954 US

Title: D
Name: COLLINS,, SUSAN
Address: 152 WINDWARD WAY
City-St-Zip: INDIAN HARBOR BEACH, FL 32937 US

Title: VC
Name: RUDOLPH, BONNIE
Address: 800 INVERNESS AVENUE
City-St-Zip: MELBOURNE, FL 32940 US

Title: D
Name: KAMEN, MARY LEE
Address: 395 CAMBRIDGE AVE. NE
City-St-Zip: PALM BAY, FL 32907 US

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: DAVID COOKE

P

01/04/2012

Electronic Signature of Signing Officer or Director

_____ Date