

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000102

FILED  
Jan 21, 2010  
Secretary of State

**Entity Name:** BRADFORD PLACE ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O PROGRESSIVE MANAGEMENT  
5400 S. UNIVERSITY DR. #101  
DAVIE, FL 33328

**New Principal Place of Business:**

C/O THE CONTINENTAL GROUP, INC.  
2043 14TH AVENUE  
VERO BEACH, FL 32960

**Current Mailing Address:**

C/O PROGRESSIVE MANAGEMENT  
5400 S. UNIVERSITY DR. #101  
DAVIE, FL 33328

**New Mailing Address:**

C/O THE CONTINENTAL GROUP, INC.  
2043 14TH AVENUE  
VERO BEACH, FL 32960

**FEI Number:** 20-5599729

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PROGRESSIVE MANAGMENT ASSOCIATES, INC.  
5400 S UNIVERSITY DRIVE #101  
DAVIE, FL 33328 US

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

THE CONTINENTAL GROUP, INC.  
2043 14TH AVENUE  
VERO BEACH, FL 32960 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: MYRNA PINEIRO

01/21/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: IGNICO, VINCENT  
Address: 2043 14TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

Title: DVP  
Name: LUIS, ALBERTO  
Address: 2043 14TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

Title: DT  
Name: SPENCER, EDVARD  
Address: 2043 14TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

Title: DS  
Name: SPENCER, SHEREATHA  
Address: 2043 14TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

Title: D  
Name: MULLEN, JOHN  
Address: 2043 14TH AVENUE  
City-St-Zip: VERO BEACH, FL 32960

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: VINCENT IGNICO

DP

01/21/2010

Electronic Signature of Signing Officer or Director

Date