

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000579

FILED
Apr 30, 2008
Secretary of State

Entity Name: BLOOMINGDALE WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3431 EAGLERIDGE CT
VALRICO, FL 33596

New Principal Place of Business:

Current Mailing Address:

4807 BAYSHORE BOULEVARD
SUITE 101
TAMPA, FL 33611

New Mailing Address:

FEI Number: 55-0877547

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPO, LISBET ESQ.
10041 BIRD ROAD
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

FERNANDEZ, KRIS
114 SOUTH FREEMONT AVENUE
TAMPA, FL 33611 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: KRIS FERNANDEZ

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: ALONSO, CARLOS
Address: 3431 EAGLERIDGE CT
City-St-Zip: VALRICO, FL 33596

Title: VP () Delete
Name: HORTA, ORLANDO JR
Address: 3431 EAGLERIDGE CT
City-St-Zip: VALRICO, FL 33596

Title: S () Delete
Name: HORTA, ORLANDO SR
Address: 3431 EAGLERIDGE CT
City-St-Zip: VALRICO, FL 33596

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BRITO, JAMIE JR
Address: 3431 EAGLERIDGE CT
City-St-Zip: VALRICO, FL 33596

Title: S (X) Change () Addition
Name: HORTA, ORLANDO JR
Address: 3431 EAGLERIDGE CT
City-St-Zip: VALRICO, FL 33596

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GAIL LIU

AGNT

04/30/2008

Electronic Signature of Signing Officer or Director

Date