

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26918

FILED
Feb 14, 2011
Secretary of State

Entity Name: BLOOMINGDALE RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

409 E COLLEGE AVE
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

PO BOX 1058
RUSKIN, FL 33575

New Mailing Address:

409 E COLLEGE AVE
RUSKIN, FL 33570

FEI Number: 59-2949421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EICH, EMILIA K
409 E COLLEGE AVE
RUSKIN, FL 33570 US

Name and Address of New Registered Agent:

EICH, EMILIA K MRS.
409 E COLLEGE AVE
RUSKIN, FL 33570 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: EMILIA K. EICH

02/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: GREWING, MARGIE
Address: 2213 HICKORY RIDGE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: P
Name: ALUOTTO, PETER
Address: 3911 NORTHRIDGE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: S
Name: ELLIS, TINA
Address: 2210 HICKORY RIDGE DRIVE
City-St-Zip: VALRICO, FL 33596

Title: T
Name: MITCHELL, ALLEN
Address: 4005 SHADOWHILL LANE
City-St-Zip: VALRICO, FL 33594

Title: D
Name: MCLEOD, MAUREEN
Address: 4002 ASPEN LEAF WAY
City-St-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: PETER ALUOTTO

MR.

02/14/2011

Electronic Signature of Signing Officer or Director

Date