

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29456

FILED
Apr 23, 2012
Secretary of State

Entity Name: BLOOMFIELD RIDGE ASSOCIATION, INC.

Current Principal Place of Business:

THE COMPASS MANAGEMENT GROUP
3701 TAMIAMI TRAIL NORTH
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

THE COMPASS MANAGEMENT GROUP
3701 TAMIAMI TRAIL NORTH
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 65-0084046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE COMPASS MANAGEMENT GROUP
3701 TAMIAMI TRAIL NORTH
NAPLES, FL 34103 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: S
Name: RODGERS, WILFRED
Address: 5955 BLOOMFIELD CIR, D-208
City-St-Zip: NAPLES, FL 34112

Title: T
Name: ROESS, TOM
Address: 8303 BLOOMFIELD CIRCLE B303
City-St-Zip: NAPLES, FL 34112

Title: VP
Name: GRAHAM, WILLIAM
Address: 8303 BLOOMFIRLD CIRCLE D-206
City-St-Zip: NAPLES, FL 34112

Title: DP
Name: OCONNER, JERRY
Address: 5985 BLOOMFIELD CIR A-108
City-St-Zip: NAPLES, FL 34112

Title: D
Name: SPADORCIA, CESARE
Address: 5955 BLOOMFIELD CIR. #A-307
City-St-Zip: NAPLES, FL 34112

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: FRANCINE MAMBUCA

VP

04/23/2012

Electronic Signature of Signing Officer or Director

Date