

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006539

FILED
Apr 25, 2007
Secretary of State

Entity Name: BLOOMINGDALE RIDGE/BRANDON HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614

New Mailing Address:

FEI Number: 59-3629119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIZZETTA & COMPANY, INC.
3434 COLWELL AVENUE
SUITE 200
TAMPA, FL 33614 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: P-D () Delete
Name: FORE, DONNA L
Address: 6615 SUMMERCOVE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: VP-D () Delete
Name: SUTHERLAND, BEV
Address: 6604 SUMMER HAVEN DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: T-D () Delete
Name: LUBINSKY, ERIC
Address: 6622 SUMMER COVE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P-D (X) Change () Addition
Name: FORE, DONNA L
Address: 6615 SUMMER COVE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: VP-D (X) Change () Addition
Name: SUTHERLAND, BEVERLY
Address: 6604 SUMMER HAVEN DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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

Title: S () Change (X) Addition
Name: GILMORE, ADA
Address: 6728 SUMMER HAVEN DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Change (X) Addition
Name: NELSON, MATT
Address: 6227 CRICKETHOLLOW DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Change (X) Addition
Name: ELLWOOD, LAURIE
Address: 6623 SUMMER COVE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

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: DONNA FORE

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date