

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136838

Entity Name: BRIDGES ACADEMY, INC.

FILED  
Sep 01, 2004  
Secretary of State

**Current Principal Place of Business:**

540 WALNUT STREET  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

894 GARY HILLERY DRIVE  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

P.O. BOX 161631  
ALTAMONTE SPRINGS, FL 32716

**New Mailing Address:**

894 GARY HILLERY DRIVE  
WINTER SPRINGS, FL 32708

FEI Number: 20-0504143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

EGLI, JACQUELINE R  
540 WALNUT STREET  
ALTAMONTE SPRINGS, FL 32714 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: EGLI, JACQUELINE R  
Address: 540 WALNUT STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DIR ( ) Delete  
Name: EGLI, JACQUELINE R  
Address: 540 WALNUT STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELINE R. EGLI

PRES

09/01/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date