

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136838

Entity Name: BRIDGES ACADEMY, INC.

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

894 GARY HILLERY DRIVE  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

894 GARY HILLERY DRIVE  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

FEI Number: 20-0504143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EGLI, JACQUELINE R  
1022 WEATHERED WOOD CIRCLE  
WINTER SPRINGS,, FL 32708 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: PRES  
Name: EGLI, JACQUELINE R  
Address: 1022 WEATHERED WOOD CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: DIR  
Name: EGLI, JACQUELINE R  
Address: 1022 WEATHERED WOOD CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP  
Name: EGLI, RICHARD  
Address: 1022 WEATHERED WOOD CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD C. EGLI

VP

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date