## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008030

Entity Name: MABEL BRIDGE HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 27, 2025
Secretary of State
4634012782CC

## **Current Principal Place of Business:**

1000 PINE HOLLOW POINT ALTAMONTE SPRINGS. FL 32714

## **Current Mailing Address:**

1000 PINE HOLLOW POINT

ALTAMONTE SPRINGS. FL 32714 US

FEI Number: 27-5155394 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SPECIALTY MANAGEMENT COMPANY OF CENTRAL FLORIDA 1000 PINE HOLLOW POINT ALTAMONTE SPRINGS, FL 32714 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: BRETT M. JORDAN 01/27/2025

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title PRESIDENT

Name MATTERA, CHRISTOPHER Name ASADOORIAN, ERIC

Address 1000 PINE HOLLOW POINT Address 1000 PINE HOLLOW POINT

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title SECRETARY Title MANAGER

Name DOS SANTOS, ZULEIKA Name SPECIALTY MANAGEMENT COMPANY

OF CENTRAL FLORIDA

Address 1000 PINE HOLLOW POINT Address 1000 PINE HOLLOW POINT

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: BRETT M JORDAN MANAGER 01/27/2025