

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001343

Entity Name: BRIDGES OF AMERICA - POST TRANSITIONAL HOUSING SERVICES, INC.

FILED
Apr 27, 2017
Secretary of State
CC8147372143

Current Principal Place of Business:

2145 METROCENTER BLVD., STE. 350
ORLANDO, FL 32835

Current Mailing Address:

2145 METROCENTER BLVD., STE. 350
ORLANDO, FL 32835 US

FEI Number: 59-3366723

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYLES, WILLIAM A.
301 EAST PINE STREET
SUITE 1400
ORLANDO, FL 32802 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: WILLIAM A. BOYLES

04/27/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR, VP	Title	DIRECTOR, PRESIDENT/CEO
Name	BROWN, CHARLES	Name	COSTANTINO-BROWN, LORI
Address	2145 METROCENTER BLVD., STE. 350	Address	2145 METROCENTER BLVD., STE. 350
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835
Title	DIRECTOR, SECRETARY	Title	DIRECTOR
Name	MCMURTRY, GRADY	Name	PENNINGTON, SAM
Address	2145 METROCENTER BLVD., STE. 350	Address	2145 METROCENTER BLVD., STE. 350
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835
Title	DIRECTOR	Title	DIRECTOR
Name	SMITH, MICHAEL	Name	GAINES, THOMAS
Address	2145 METROCENTER BLVD., STE. 350	Address	2145 METROCENTER BLVD., STE. 350
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835
Title	DIRECTOR, TREASURER	Title	DIRECTOR
Name	HOLDSWORTH, GERALD	Name	DENMARK, CECILIA
Address	2145 METROCENTER BLVD., STE. 350	Address	2145 METROCENTER BLVD., STE. 350
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835

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: LORI COSTANTINO-BROWN

PRESIDENT/CEO

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date