

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04116

**Entity Name:** BRIDGEPOINT HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O CARIBBEAN PROPERTY MGMT.  
12301 SW 132ND CT  
MIAMI, FL 33186**Current Mailing Address:**12301 SW 132ND CT  
MIAMI, FL 33186**FEI Number:** 59-2489033**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD, INC.  
201 ALHAMBRA CIRCLE, 11TH FLOOR  
CORAL GABLES, FL 33134 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:** MICHAEL HYMAN, ESQ.

04/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	TORRES, MANJU
Address	C/O CARIBBEAN PROPERTY MGMT. 12301 SW 132ND CT
City-State-Zip:	MIAMI FL 33186

Title	SECRETARY
Name	RODRIGUEZ, DENYSIS
Address	C/O CARIBBEAN PROPERTY MGMT. 12301 SW 132ND CT
City-State-Zip:	MIAMI FL 33186

Title	DIRECTOR
Name	GAFFNEY, CHARLES
Address	12301 SW 132ND CT
City-State-Zip:	MIAMI FL 33186

Title	PRESIDENT
Name	PARRA, DENNISSE
Address	C/O CARIBBEAN PROPERTY MGMT. 12301 SW 132ND CT
City-State-Zip:	MIAMI FL 33186

Title	VP
Name	BARCELO, CARINA
Address	C/O CARIBBEAN PROPERTY MGMT. 12301 SW 132ND CT
City-State-Zip:	MIAMI FL 33186

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:** DENNISSE PARRA

PRESIDENT

04/05/2024

Electronic Signature of Signing Officer/Director Detail

Date