

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 605246

FILED  
Jan 25, 2011  
Secretary of State

**Entity Name:** BAHAMA FAMILY ISLAND PROMOTION BOARD, INC.

**Current Principal Place of Business:**

1200 S PINE ISLAND RD  
700  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

10001 VESTAL PLACE  
CORAL SPRINGS, FL 33071 US

**Current Mailing Address:**

1200 S PINE ISLAND RD  
700  
PLANTATION, FL 33324 US

**New Mailing Address:**

10001 VESTAL PLACE  
CORAL SPRINGS, FL 33071 US

**FEI Number:** 59-1881976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAY, BESKIN  
401 E. LAS OLAS BLVD.  
SUITE 1850  
FORT LAUDERDALE, FL 33301 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: PP  
Name: BIRCH, JEFF  
Address: SMALL HOPE BAY LODGE, FRESH CREEK  
City-St-Zip: ANDROS, BAHAMAS, - - BS

Title: PD  
Name: KAPPELER, STEPHEN  
Address: CAPE ELEUTHERA RESORT, ROCK SOUND  
City-St-Zip: ELEUTHERA, -- -- BS

Title: T  
Name: JIMISON, KENT  
Address: 10001 VESTAL PL  
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VP  
Name: DARVILLE, SHAVONNE  
Address: GEMS AT PARADISE  
City-St-Zip: LONG ISLAND, -- -- BS

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: KENT JIMISON

T

01/25/2011

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

\_\_\_\_\_  
Date