

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 12, 2009
Secretary of State**

DOCUMENT# N20429

Entity Name: BERMUDA BAY COMMUNITY HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

101 PARK PLACE BLVD.
STE 2
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

101 PARK PLACE BLVD.
STE 2
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 59-2876407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOC. MGMT. GRP. OF CNTRL FL., INC.
101 PARK PLACE BLVD.
STE. 2
KISSIMMEE, FL 34741 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: PD () Delete
Name: NEILL, DON
Address: 2680 HORSESHOE BAY DRIVE
City-St-Zip: KISSIMMEE, FL 34741

Title: STD () Delete
Name: MARTINS, MARIA
Address: 838 LONG BAY COURT
City-St-Zip: KISSIMMEE, FL 34741

Title: VD () Delete
Name: GUIKEMA, DARLENE
Address: 805 HORSESHOE BAY DR
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: TONG, DEIRDRE
Address: 850 LONG BAY COURT
City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DON NEILL

P

03/12/2009

Electronic Signature of Signing Officer or Director

_____ Date