2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2014
Secretary of State
CC5710530319

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Entity Name: BERMUDA PALMS OF NAPLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109-6834

Current Mailing Address:

C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109-6834 US

FEI Number: 20-1248599

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD
NAPLES, FL 34109-6834 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	T
Name	WATSON, RON	Name	DEMETRIOU, JOHN
Address	10196 BOCA CIRCLE	Address	4940 S COUGAR COURT, #204
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109

Title	VP
Name	EHMANN, KLAUS
Address	14901 TOSCANA WAY
City-State-Zip:	NAPLES FL 34109

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: RON WATSON P 03/27/2014

Electronic Signature of Signing Officer/Director Detail — Date