## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N0400005257

Entity Name: BERMUDA PALMS OF NAPLES CONDOMINIUM ASSOCIATION,

INC.

FILED
Apr 03, 2013
Secretary of State
CC2558145638

## **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 PRESIDENT 04/03/2013