

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47891

**FILED**  
**Apr 05, 2018**  
**Secretary of State**  
**CC8639249648**

**Entity Name:** THE BERMUDA AT DOLPHIN CAY OWNER'S ASSOCIATION, INC

**Current Principal Place of Business:**

3001 EXECUTIVE DR.  
SUITE 260  
CLEARWATER, FL 33762

**Current Mailing Address:**

3001 EXECUTIVE DR.  
SUITE 260  
CLEARWATER, FL 33762 US

**FEI Number: 59-3185518**

**Certificate of Status Desired: No**

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

ZACUR, GRAHAM & COSTIS  
5200 CENTRAL AVENUE  
ST. PETERSBURG, FL 33707 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: RICHARD ZACUR** **04/05/2018**  
\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TACKETT, HENRIETTA  
Address        3001 EXECUTIVE DR.  
                  SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            VP  
Name            SAMPSON, CYNTHIA  
Address        3001 EXECUTIVE DR.  
                  SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            SECRETARY  
Name            ALLEN, TAMMY  
Address        3001 EXECUTIVE DR.  
                  SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            DIRECTOR  
Name            MACREYNOLDS, MARTHA  
Address        3001 EXECUTIVE DR.  
                  SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            TREASURER  
Name            MACREYNOLDS, KATIE  
Address        3001 EXECUTIVE DR.  
                  SUITE 260  
City-State-Zip: CLEARWATER FL 33762

*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: HENRIETTA TACKETT** **PRESIDENT** **04/05/2018**  
\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail Date