

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005792

Entity Name: BERMUDA DUNES VILLAGE NEIGHBORHOOD ASSOCIATION, INC.

FILED
Mar 22, 2016
Secretary of State
CC8214619481

Current Principal Place of Business:

5980 WINSTON TRAILS BLVD
LAKE WORTH, FL 33463

Current Mailing Address:

5980 WINSTON TRAILS BLVD
LAKE WORTH, FL 33463 US

FEI Number: 65-0833203

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATED CORPORATE SERVICES
6111 BROKEN SOUND PARKWAY NW
SUITE 200
BOCA RATON, FL 33487 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: LOUIS CAPLAN

03/22/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name SPENCER, JOHN C
Address 5980 WINSTON TRAILS BLVD
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT
Name FRISCIA, VINCE
Address 5980 WINSTON TRAILS BLVD
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER
Name KARNES, GARY
Address 5980 WINSTON TRAILS BLVD
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY
Name WISNIEWSKI, BRIAN
Address 5980 WINSTON TRAILS BLVD
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR
Name BARBALACO, GIOVANNI
Address 5980 WINSTON TRAILS BLVD
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR
Name GUCCIARDI, STEVE
Address 5980 WINSTON TRAILS BLVD
City-State-Zip: LAKE WORTH FL 33463

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: VINCE FRISCIA

PRESIDENT

03/22/2016

Electronic Signature of Signing Officer/Director Detail

Date