

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725502

FILED
Apr 10, 2009
Secretary of State

Entity Name: BERMUDA CLUB OF GULF STREAM INC

Current Principal Place of Business:

10 SEA RD.
DELRAY BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

C/O ERIK SMITH
P. O. BOX X1132
BOYNTON BEACH, FL 334251132 US

New Mailing Address:

FEI Number: 59-1450715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERIK SMITH
1171 N. OCEAN BLVD
GULFSTREAM, FL 33483 US

Name and Address of New Registered Agent:

SMITH, ERIK J
1171 N. OCEAN BLVD
GULFSTREAM, FL 33483 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: ERIK J. SMITH

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: ALLIS, WILLIAM
Address: 3883 BERMUDA LANE, #6
City-St-Zip: DELRAY BEACH, FL 33483

Title: VPD () Delete
Name: PHILLIPS, SUSAN
Address: 3883 BERMUDA LANE #2
City-St-Zip: DELRAY BEACH, FL 33483

Title: PD () Delete
Name: ANSTEY, SANDFORD
Address: 10 SEA RD #3
City-St-Zip: GULFSTREAM, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: PHILLIPS, SUSAN
Address: 3883 BERMUDA LANE #2
City-St-Zip: DELRAY BEACH, FL 33483

Title: VPD (X) Change () Addition
Name: ANSTEY, SANDFORD
Address: 10 SEA RD #3
City-St-Zip: GULFSTREAM, FL 33483

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: SUSAN PHILLIPS

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date