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FILED

May 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **735756** (9)

1. Corporation Name

BERMUDA CLUB MANAGEMENT COUNCIL, INC.

Principal Place of Business

Mailing Address

**6299 N.W. 57TH STREET
TAMARAC FL 33319**

**6299 N.W. 57TH STREET
TAMARAC FL 33319-2305**



3. Date Incorporated or Qualified **05/06/1976** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business 2a. Mailing Address 4. FEI Number **59-1666999** Applied For ☐ Not Applicable ☒

22. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

23. City & State 28. City & State 6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24. Zip 25. Country 29. Zip 30. Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HYMAN, MICHAEL L. ESQ.
19 WEST FLAGLER STREET SUITE 416
MIAMI FL 33130**

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ATD ☒ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	HUBER, JACK B.	1.2 NAME	Bauman, Sidney
STREET ADDRESS	5890 NW 64TH AVE	1.3 STREET ADDRESS	5800 NW 64th Avenue
CITY-ST-ZIP	TAMARAC FL	1.4 CITY-ST-ZIP	Tamarac, FL. 33319
TITLE	TD ☒ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	LANG, JACK	2.2 NAME	Huber, Jack B.
STREET ADDRESS	5830 NW 64 AVE	2.3 STREET ADDRESS	5860 NW 64th Avenue
CITY-ST-ZIP	TAMARAC FL	2.4 CITY-ST-ZIP	Tamarac, FL. 33319
TITLE	VD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	KRAKOFF, RITA	3.2 NAME	
STREET ADDRESS	6000 N.W. 64TH AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL 33319	3.4 CITY-ST-ZIP	
TITLE	SD ☒ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	SIMMS, BERNARD	4.2 NAME	Winokur, Herbert
STREET ADDRESS	5851 N.W. 62ND AVE.	4.3 STREET ADDRESS	6051 NW 61st Avenue
CITY-ST-ZIP	TAMARAC FL 33319	4.4 CITY-ST-ZIP	Tamarac, FL. 33319
TITLE	PD ☒ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	KAUFMAN, WARREN	5.2 NAME	Sher, Morris
STREET ADDRESS	6350 N.W. 62ND ST.	5.3 STREET ADDRESS	6161 NW 57th Court
CITY-ST-ZIP	TAMARAC FL 33319	5.4 CITY-ST-ZIP	Tamarac, FL. 33319
TITLE	VD ☒ DELETE	6.1 TITLE	☒ Change ☐ Addition
NAME	SHER, MORRIS	6.2 NAME	Richard, Frederick
STREET ADDRESS	6161 NW 57TH COURT	6.3 STREET ADDRESS	6150 NW 62nd Street
CITY-ST-ZIP	TAMARAC FL	6.4 CITY-ST-ZIP	Tamarac, FL. 33319

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael L. Esq. **RECORDED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

Date

(954) 721-6645

Daytime Phone # 0035174

CR2E037 (9/96)