


FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90025 026 ****61.25

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 735756					
1. Entity Name BERMUDA CLUB MANAGEMENT COUNCIL, INC.					
Principal Place of Business 6299 N.W. 57TH STREET TAMARAC, FL 33319			Mailing Address 6299 N.W. 57TH STREET TAMARAC, FL 33319		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1666999	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CASTLE MANAGEMENT, INC. 12270 SW 3RD STREET PLANTATION, FL 33323			Name STANLEY FAUST		
			Street Address (P.O. Box Number is Not Acceptable) 6299 N.W. 57TH STREET		
			MANAGEMENT OFFICE		
			City TAMARAC		FL
8. 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. I am familiar with, and accept the obligations of, registered agent.					
SIGNATURE <u><i>Stanley Faust President</i></u>			DATE <u>5-2-07</u>		
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FAUST, STANLEY		NAME		
STREET ADDRESS	5860 NW 64TH AVE		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
TITLE	1VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EDWARDS, MILTON		NAME		
STREET ADDRESS	5961 NW 61ST ST		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
TITLE	2VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DALE, NORMAN		NAME		
STREET ADDRESS	5890 NW 64TH AVE		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
TITLE	3VPD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PORCELLO, CARMINE		NAME		
STREET ADDRESS	6000 NW 64TH AVE		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
TITLE	CSD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LEMBERG, JOE		NAME		
STREET ADDRESS	6150 NW 62ND ST		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
TITLE	RSD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CORBIN, SID		NAME		
STREET ADDRESS	5750 NW 64TH AVE		STREET ADDRESS		
CITY-ST-ZIP	TAMARAC, FL 33319		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Stanley Faust President</i></u>			DATE: <u>5-2-07</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		
			Daytime Phone #		

40110110



02152007 Chg-NP CR2E037 (12/06)

40110775 ATTACHMENT

BERMUDA CLUB MANAGEMENT COUNCIL – DOCUMENT NO 735756

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|------|---|---|
| # 7. | TD
CROSBY, HERBERT
6091 NW 61 ST AVENUE
TAMARAC, FL 33319 | 6200 NW 62 ND STREET
TAMARAC, FL 33319 |
| #8. | ACS
MEYERSON, MICHAELINE
5980 NW 64 TH AVENUE
TAMARAC, FL 33319 | #18. D
LUTHER, EUGENE
6051 NW 61 ST AVENUE
TAMARAC, FL 33319 |
| #9. | ATD
FRIMMER, MILDRED
6071 NW 61 ST AVENUE
TAMARAC, FL 33319 | #19. D
MAYER, FRAN
6001 NW 61 ST AVENUE
TAMARAC, FL 33319 |
| #10. | D
BEAUMONT, HENRY
5940 NW 64 TH AVENUE
TAMARAC, FL 33319 | #20. D
SCHEFFLER, GERTRUDE
6021 NW 61 ST AVENUE
TAMARAC, FL 33319 |
| #11. | D
WALTERS, MARY
6020 NW 64 TH AVENUE
TAMARAC, FL 33319 | #21. D
KAPLAN, MURRAY
5901 NW 61 ST AVENUE
TAMARAC, FL 33319 |
| #12. | D
MERANCHIK, BEVERLY
6050 NW 64 TH AVENUE
TAMARAC, FL 33319 | #22. D
DONOVAN, MARGARET
5841 NW 61 ST AVENUE
TAMARAC, FL 33319 |
| #13. | D
MOORE, JEAN
6070 NW 64 TH AVENUE
TAMARAC, FL 33319 | #23. D
CASSORLA, MORRIS
6161 NW 57 TH COURT
TAMARAC, FL 33319 |
| #14. | D
LIFFLAND, TERRY
6090 NW 64 TH AVENUE
TAMARAC, FL 33319 | #24. D
ARONOWITZ, PAUL
5851 NW 62 ND AVENUE
TAMARAC, FL 33319 |
| #15. | D
ADEST, LEONARD
6350 NW 62 ND STREET
TAMARAC, FL 33319 | #25. D
FORD, ALBERT
5801 NW 62 ND AVENUE
TAMARAC, FL 33319 |
| #16. | D
ABRAMOOWITZ, LIBBI
6300 NW 62 ND STREET
TAMARAC, FL 33319 | #26. D
BARTUS, FRANK
5830 NW 64 TH AVENUE
TAMARAC, FL 33319 |
| #17. | D
REESE, JOSEPH | #27. D
HENRIQUE, DON
5800 NW 64 TH AVENUE
TAMARAC, FL 33319 |