## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

SIGNATURE:

5959 WINKLER RD FT MYERS FL 33919

21

(9)

Mailing Address

FT MYERS FL 33907

2a. Mailing Address

26

12650 WHITEHALL DRIVE

## BERMUDA CLUB CONDOMINIUM ASSOCIATION, INC-

## **FILED** Feb 06 1998 8:00am Secretary of State

|--|

Jan 14 1998 94-481-7591

Applied For

\$8.75 Additional

Not Applicable

3. Date Incorporated or Qualified

12/12/1978

59-1879563

5. Certificate of Status Desired

4. FEI Number

21		26						5. Certificate of Glates Desired	<u> </u>	F	<u>ee</u> Re	quired
Suite, Apt. #, etc.		Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be					
22		27						Trust Fund Contribution		Add	ded to	Fees
City & State								7. Is this nonprofit corporation a homeowners association?				
23		28							Yes	No		
Zip	Country	L Zi	p	_	ıntry		ļ	8. This corporation owes or has pai				
24	25	29		30				Personal Property Tax due June		Yes		No
	9. Name and Address of Current	Register	ed Agent		104			10. Name and Address of New Rec	istered	Agent		
					81	Name						
Benson, Mark R. 12650 Whitehall Drive					82	Street A	ddres	s (P.O. Box Number is Not Acceptable	e)			
ft myei	RS FL 33907				83							
					84	Citv				85	Zip C	ode
						O.i.y			FL	ا ۳۰	p	
11. Pursuant t	to the provisions of Sections 617.0502	and 617.	1508, Florida Statut	es, the a	bove	-named o	corpor	ation submits this statement for the pr	irpose o	chang	ing its	registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	t Florida. ons of. Si	Such change was a ection 617.0503. Fig	authorize orida Sta	d by tutes	the corpo	oration	n's board of directors. I hereby accep	t the app	ointmei	nt as r	egistered
						•						
SIGNATURE _	Signature, typed or printed name of registered agent	and title If ap	plicable. (NOT	E: Registere	d Ager	nt signature re	equired	when reinstating)	DATE			
12.	OFFICERS AND	DIRECTO	RS	13.				ADDITIONS/CHANGES TO OFFICE	ERS AND	DIREC	TOR	3 IN 12
TITLE	D	· ·	☐ DELETE	1.1 T	TLE		D			Cha	ange	XXXdditlo
NAME	DROEGE, HARRIET			1.2 N	AME	ŀ	Hou	ıtz, Elizabeth				
STREET ADDRESS	5959 WINKLER RD, 320			1.35	TREET A	ADDRESS		9 Winkler Rd #103				
CITY-ST-ZIP	FT. MYERS FL			1.4 C	ITY-ST	- ZIP		Myers, FL 33919				
TITLE	VD		DELETE	2.1 T	_			Hyers, FD 33312		☐ Cha	ange	Addition
NAME	BRYANT, MARTHA			2.2 N		Ī					-	
STREET ADDRESS	5959 WINKLER RD. 105					ADDRESS						
CITY-ST-ZIP	FT MYERS, FL 00000			- 1	ITY-S							
TITLE	PD		DELETE	3.1 TI		1-21		<del></del>		☐ Cha	inge	Addition
NAME	TORRES, JOSEPH			3.2 N								
STREET ADORESS	5959 WINKLER ROAD #117			1		ADDRESS						
ſ	FORT MYERS FL					4						
CITY-ST-ZIP TITLE	STD		XXI DELETE	4.1 Ti	ITY-SI	1-2P				☐ Cha	nde	Addition
NAME	RAMELLA, MARIE			4.1 II		}						
	5959 WINKLER ROAD #210											
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP	FT. MYERS FL		DELETE		TY-ST	- ZIP				☐ Cha	nge	Additlor
TITLE	D OLCEN DOMALD		T DETELE	5.1 TI		-				08	Hyc	III MUUIIOI
NAME	OLSEN, DONALD			5.2 N								
STREET ADDPESS	5959 WINKLER RD, 201					ADDRESS						
CITY-ST-ZIP	FORT MYERS FL		C Severe		TY-ST	- ZIP				1 7 0:		
TITLE			☐ DELETE	6.1 TI		- 1				∐ Cha	nge	Addition
NAME				6.2 NA	ME	-						
STREET ADDRESS				6.3 ST	REET A	ADDRESS						
CITY-ST-ZIP				6,4 CI	TY-ST	- ZIP						
14. I hereby co	ertify that the information supplied with	this filing	does not qualify for	r the exe	empti	ion stated	in Se	ction 119.07(3)(i), Florida Statutes. I fi	urther ce	rtify tha	t the i	nformation
officer or of Block 12 o	ertify that the information supplied with on this annual report or supplemental a director of the corporation on the receiv or Block 13 if changed, or on an attach	er or trus ment with	tee empowered to en any address.	execute t	his re	eport as r	equire	ed by Chapter 617, Florida Statutes; a	nd that n	ty name	e app	ears in