

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745232

FILED
Feb 10, 2004
Secretary of State

Entity Name: BERMUDA CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5959 WINKLER RD
FT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

12650 WHITEHALL DRIVE
FT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 59-1879563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BENSON, MARK R.
12650 WHITEHALL DRIVE
FT MYERS, FL 33907 US

Name and Address of New Registered Agent:

BENSON, MARK R.
12650 WHITEHALL DRIVE
FT MYERS, FL 33907 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: MARK R. BENSON

02/10/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANCINI, NICHOLAS
Address: 5746 HARBOUR CLUB RD
City-St-Zip: FT. MYERS, FL 33919

Title: TD () Delete
Name: AURAND, MARIE
Address: 5959 WINKLER RD 106
City-St-Zip: FT MEYERS, FL 33919

Title: PD () Delete
Name: TORRES, JOSEPH
Address: 5959 WINKLER ROAD #117
City-St-Zip: FORT MYERS, FL

Title: VD () Delete
Name: COONEY, JOSEPH
Address: 5959 WINKLER RD 214
City-St-Zip: FORT MYERS, FL 33919

Title: SD (X) Delete
Name: FEARICK, ANNA J
Address: 5959 WINKLER RD #110
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: FEARICK, ANNA J
Address: 5959 WINKLER RD #110
City-St-Zip: FT. MYERS, FL 33919

Title: TD (X) Change () Addition
Name: DURKAN, JAMES P
Address: 5959 WINKLER RD 105
City-St-Zip: FT MYERS, FL 33919

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH TORRES

PRES

02/10/2004

Electronic Signature of Signing Officer or Director

Date