

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827512

FILED  
Apr 14, 2010  
Secretary of State

Entity Name: BERMUDA COMPANY

**Current Principal Place of Business:**

ONE EAST LIBERTY STREET  
SUITE 416  
RENO, NV 89501

**New Principal Place of Business:**

**Current Mailing Address:**

ONE EAST LIBERTY STREET  
SUITE 416  
RENO, NV 89501

**New Mailing Address:**

FEI Number: 88-0110796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POSTEN, KATHRYN R  
STE 403  
4649 PONCE DE LEON BLVD  
CORAL GABLES, FL 33146 US

**Name and Address of New Registered Agent:**

POSTEN, KATHRYN R  
SUITE 306  
4649 PONCE DE LEON BLVD  
CORAL GABLES, FL 33146 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:

04/14/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: LLEWELLYN, DAVID M  
Address: C/O NORTHERN TRUST, 700 BRICKELL AVE.  
City-St-Zip: MIAMI, FL 33131

Title: VTD  
Name: KERESTES, BRUCE S  
Address: C/O NORTHERN TRUST, 700 BRICKELL AVE.  
City-St-Zip: MIAMI, FL 33131

Title: V  
Name: WILBURN, DONNA M  
Address: C/O NORTHERN TRUST, 700 BRICKELL AVE.  
City-St-Zip: MIAMI, FL 33131

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRUCE S. KERESTES

V.P.

04/14/2010

Electronic Signature of Signing Officer or Director

Date