

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01005

FILED
Apr 21, 2009
Secretary of State

Entity Name: BERMUDA TERRACE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

19291 WEST INDIES
TEQUESTA, FL 33469 US

New Principal Place of Business:

4932 BIMINI ROAD
TEQUESTA, FL 33469 US

Current Mailing Address:

PO BOX 3616
TEQUESTA, FL 33469 US

New Mailing Address:

FEI Number: 59-2359357 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DALESSANDRO, TOM
19291 WEST INDIES
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

BURNICK, MIKE
4932 BIMINI ROAD
TEQUESTA, FL 33469 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: MIKE BURNICK

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALESSANDRO, TOM
Address: 19291 WEST INDIES
City-St-Zip: TEQUESTA, FL 33469

Title: V () Delete
Name: BURNICK, MIKE
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: S () Delete
Name: SCOTT, SHARON
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: T () Delete
Name: SWARTZ, TERRY
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: RESCH, HANK
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: ASKEW, ANTHONY
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURNICK, MIKE
Address: 4932 BIMINI ROAD
City-St-Zip: TEQUESTA, FL 33469

Title: V (X) Change () Addition
Name: RESCH, HANK
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: S (X) Change () Addition
Name: VICARS, LARRY
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: T (X) Change () Addition
Name: MARTIN, STEVE
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: D (X) Change () Addition
Name: GALLOWAY, MIKE
Address: P. O. BOX 3616
City-St-Zip: TEQUESTA, FL 33469

Title: N/A (X) Change () Addition
Name: N/A, N/A
Address: N/A
City-St-Zip: N/A, FL N/A

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LARRY VICARS

S

04/21/2009

Electronic Signature of Signing Officer or Director

Date