## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006960

FILED Apr 19, 2006 Secretary of State

Entity Name: BERMUDA ROYALE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3260 DOUGLAS DRIVE NAPLES, FL 34105

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 10369 4802 AIRPORT ROAD NAPLES, FL 34101 US NAPLES, FL 34105 US

FEI Number: 20-0162649 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MURRELL, ROBERT E ESQ SAMOUCÉ, MURRELL & GAL, PA 800 LAUREL OAK DR SUITE 300

NAPLES, FL 34108 US

WORLD TENNIS CLUB, INC. 4802 AIRPORT ROAD NAPLES, FL 34105

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: WORLD TENNIS CLUB, INC. 04/19/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete COMEAUX, CAROL Name: 3260 DOUGLAS DR. #201 Address: City-St-Zip: NAPLES, FL 34105 US

Title: VSD () Delete TERRY, JOCELYN Name: Address: 3250 DOUGLAS DR. #201 City-St-Zip: NAPLES, FL 34105 US

Title: VTD () Delete HILLMAN, DOUGLAS Name: 3250 DOUGLAS DRIVE #205 Address: City-St-Zip: NAPLES, FL 34105 US

Title: () Delete

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

COMEAUX, CAROL Name: Address: 3304 EUROPA DRIVE #1 City-St-Zip: NAPLES, FL 34105 US

Title: SD (X) Change ( ) Addition

Name: TERRY, JOCELYN Address: 3250 DOUGLAS DR. #201 City-St-Zip: NAPLES, FL 34105 US

Title: (X) Change ( ) Addition

FYFFE, ELAINE Name:

3250 DOUGLAS DRIVE #104 Address: City-St-Zip: NAPLES, FL 34105 US

Title: ( ) Change (X) Addition

Name: SIMONTON, KATHERINE 3275 JESSICA LANE Address: City-St-Zip: NAPLES, FL 34105

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL COMEAUX PD 04/19/2006