

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000007923

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** BERMUDA ISLES AT LAKE SANTA BARBARA TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1011-1055 S RIVERSIDE DR  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

1011 S RIVERSIDE DR  
POMPANO BEACH, FL 33062

**New Mailing Address:**

**FEI Number:** 20-3874533

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SYKORA, WILLIAM A  
LAKE SANTA BARBARA TOWNHOUSE PARTNERS, LLC  
1011 S. RIVERSIDE DR  
POMPANO BEACH, FL 33062 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SYKORA, WILLIAM A  
Address: 1011 S RIVERSIDE DRIVE  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: DIR  
Name: SYKORA, CAROLE M  
Address: 1011 S RIVERSIDE DRIVE  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: DIR  
Name: HUDSON, JOAN  
Address: 1027 S RIVERSIDE DR  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: DIR  
Name: CAPONERA, MARISSA  
Address: 1031 S RIVERSIDE DR  
City-St-Zip: POMPANO BEACH, FL 33062 US

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

SIGNATURE: WILLIAM A. SYKORA

PRE

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date