

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009273

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** BERMUDA PARK EAST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

186 HILLSIDE DRIVE  
ONEONTA, NY 13820

**New Principal Place of Business:**

445 COUNTRY HOLLOW CT  
B203  
NAPLES, FL 34104

**Current Mailing Address:**

186 HILLSIDE DRIVE  
ONEONTA, NY 13820

**New Mailing Address:**

445 COUNTRY HOLLOW CT  
B203  
NAPLES, FL 34104

FEI Number: 20-2146034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURDEN, FRANCIS  
445 COUNTRY HOLLOW CT  
B-203  
NAPLES, FL 34104 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: PD  
Name: EMANUEL, RICHARD  
Address: 46 PINE TREE RD  
City-St-Zip: MONROE, NY 10950

Title: VSTD  
Name: BURDEN, FRANCIS  
Address: 445 COUNTRY HOLLOW CT. B-203  
City-St-Zip: ONEONTA, NY 13820

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: FRANCIS G. BURDEN

VSTD

04/14/2010

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

\_\_\_\_\_  
Date