2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# N05000009023

Entity Name: BERMUDA LINKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6312 TRAIL BLVD
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

PO BOX 770278
NAPLES, FL 34107

New Mailing Address:

FEI Number: 20-3430242 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIVELY, DENNIS F
6312 TRAIL BLVD
NAPLES, FL 34108 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: DP ( ) Delete
Name: MULLERSMAN, STEVEN J
Address: 2190 J & C BLVD
City-St-Zip: NAPLES, FL 34109

Title: VTD ( ) Delete
Name: MARTENY, NELSON K
Address: 2190 J & C BLVD
City-St-Zip: NAPLES, FL 34109

Title: SD ( ) Delete
Name: DIAZ, MARIA T
Address: 190 J & C BLVD
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MAURIELLO, TONY
Address: 9621 ROSEWOOD POINTE TER, #102
City-St-Zip: NAPLES, FL 34135

Title: TD (X) Change ( ) Addition
Name: SIRAGUSA, JOHN
Address: 770 E PEARSON ST, #604
City-St-Zip: DES PLAINES, IL 60016

Title: SD (X) Change ( ) Addition
Name: MOORE, JUDY
Address: 5250 RIDGEWAY DRIVE
City-St-Zip: MINNETONKA, MN 55345

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: TONY MAURIELLO PD 04/23/2007

Electronic Signature of Signing Officer or Director — Date