

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 05, 2010
Secretary of State

Entity Name: BERMUDA LINKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD.
NAPLES, FL 341096834 US

New Principal Place of Business:

Current Mailing Address:

C/O ABILITY MANAGEMENT, INC
6736 LONE OAK BLVD.
NAPLES, FL 341096834 US

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
6736 LONE OAK BLVD
NAPLES, FL 341096834 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: T
Name: SIRAGUSA, JOHN
Address: 770 E PEARSON ST, #604
City-St-Zip: DES PLAINES, IL 60016

Title: S
Name: MOORE, ROBERT
Address: 26800 ROSEWOOD POINTE LANE, # 203
City-St-Zip: BONITA SPRINGS, FL 34135

Title: P
Name: PRESTON, MICHAEL
Address: 26660 ROSEWOOD POINTE CIR, # 106
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP
Name: HOLLAND, JAMES
Address: 9601 ROSEWOOD POINTE TERRACE, # 202
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VP
Name: GRAHAM, WILLIAM
Address: 9600 ROSEWOOD POINTE TERRACE, # 104
City-St-Zip: BONITA SPRINGS, FL 34135 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: DENNIS F LIVELY

MGR

04/05/2010

Electronic Signature of Signing Officer or Director

Date