

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000004609

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** BERMUDA ESTATES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1515 N FEDERAL HWY STE 306  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

1515 N FEDERAL HWY STE 306  
BOCA RATON, FL 33432

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

KIRSCHNER, MITCHELL B ESQ  
1515 NORTH FEDERAL HIGHWAY  
SUITE 314  
BOCA RATON, FL 33432 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: COLEY, RICHARD T  
Address: 2412 COUNTRY CLUB AVE  
City-St-Zip: TAMPA, FL 33611

Title: VSD  
Name: SIROF, BRUCE G  
Address: 1515 N FEDERAL HWY STE 306  
City-St-Zip: BOCA RATON, FL 33432

Title: VTD  
Name: COLLIER, SCOTT  
Address: 5850 T.G. LEE BLVD STE 290  
City-St-Zip: ORLANDO, FL 32822

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: SCOTT COLLIER

VTD

03/18/2010

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

\_\_\_\_\_  
Date