

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Aug 21, 2009  
Secretary of State**

DOCUMENT# N14048

**Entity Name:** BERMUDA RUN CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**ONE BERMUDA RUN WAY  
SAINT AUGUSTINE, FL 32084 US**New Principal Place of Business:**ONE BERMUDA RUN WAY  
SAINT AUGUSTINE, FL 32080 US**Current Mailing Address:**P.O. BOX 2041  
SAINT AUGUSTINE, FL 32085 US**New Mailing Address:**P.O. BOX 840076  
SAINT AUGUSTINE, FL 32080 US

FEI Number: 59-2874325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**KIERNAN, SHELTON  
288 BOULEVARD DES PINS  
SAINT AUGUSTINE, FL 32080 US**Name and Address of New Registered Agent:**CHAMBERS, BRUCE D  
105 SPANISH OAKS LANE  
SAINT AUGUSTINE, FL 32080 US

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: BRUCE D. CHAMBERS

08/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: D ( ) Delete  
Name: SALVADOR, AUDAY  
Address: 1760 VERNON LN  
City-St-Zip: SUPERIOR, CO 80027Title: DP ( ) Delete  
Name: KERNAN, SHELTON  
Address: 288 BLVD DES PINS  
City-St-Zip: SAINT AUGUSTINE, FL 32080Title: DS ( ) Delete  
Name: DEW, NORMA  
Address: 2 BERMUDA RUN WAY #6  
City-St-Zip: SAINT AUGUSTINE, FL 32080Title: D ( ) Delete  
Name: KOKKINOS, MICHAEL  
Address: 11731 SEAWARD COURT  
City-St-Zip: JACKSONVILLE, FL 32225**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DVP (X) Change ( ) Addition  
Name: AUDAY, SALVADOR  
Address: 1760 VERNON LN  
City-St-Zip: SUPERIOR, CO 80027Title: DP (X) Change ( ) Addition  
Name: CHAMBERS, BRUCE D  
Address: 105 SPANISH OAKS LANE  
City-St-Zip: SAINT AUGUSTINE, FL 32080Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: DT (X) Change ( ) Addition  
Name: KOKKINOS, MICHAEL  
Address: 11731 SEAWARD COURT  
City-St-Zip: JACKSONVILLE, FL 32225

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE D. CHAMBERS

DP

08/21/2009

Electronic Signature of Signing Officer or Director

Date