

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2006 8:00 am
Secretary of State

04-27-2006 90221 026 ****61.25

DOCUMENT # N16545 1. Entity Name BERMUDA RUN MAINTENANCE ASSOCIATION, INC.			
Principal Place of Business 6700 NW BROKEN SOUND PKWY #203 BOCA RATON, FL 33496		Mailing Address 6700 NW BROKEN SOUND PKWY #203 BOCA RATON, FL 33496	
2. Principal Place of Business 21 SE 5TH STREET Suite, Apt. #, etc. #100 City & State BOCA RATON Zip 33432 Country PALM BEACH		3. Mailing Address 21 SE 5TH STREET Suite, Apt. #, etc. #100 City & State BOCA RATON Zip 33432 Country PALM BEACH	
4. FEI Number 65-0016577		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ELIAS, HOWARD 6700 NW BROKEN SOUND PKWY #203 BOCA RATON, FL 33487		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐	
\$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CORNFIELD, BERNICE 5723 NW 23RD TERRACE BOCA RATON, FL 33496	☒ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRANN, CINDY 2279 NW 59TH STREET BOCA RATON, FL 33496	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELTZER, BARBARA 5867 NW 23RD TERRACE BOCA RATON, FL 33496	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, MARGORIE 5844 N.W. 23 TERRACE BOCA RATON, FL 33496	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SPEISMAN, JUNE 5845 NW 23RD TERRACE BOCA RATON, FL 33496	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rosenberg Karen 2335 NW 59 St BOCA RATON 33496	☐ Delete	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4/24/06 Daytime Phone #	