

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000173

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** HAMILTON PLACE AT BERMUDA BAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2001 9TH AVENUE  
308  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

**Current Mailing Address:**

2001 9TH AVENUE  
308  
VERO BEACH, FL 32960 US

**New Mailing Address:**

**FEI Number:** 65-0390938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLER, WILLIAM  
2001 9TH AVE  
308  
VERO BEACH, FL 32960 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 ( ) Delete  
Name: GREENE, JAMES S  
Address: 111 LAUREL OAK LANE  
City-St-Zip: VERO BEACH, FL

Title: STD ( ) Delete  
Name: MCABOY, THOMAS H  
Address: 121 LAUREL OAK LANE  
City-St-Zip: VERO BEACH, FL

Title: VPD ( ) Delete  
Name: EMERSON, DANIEL  
Address: 650 SABLE OAK LANE  
City-St-Zip: VERO BEACH, FL 32963

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES GREENE

PD

04/13/2009

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

\_\_\_\_\_  
Date