## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000003657

FILED Feb 16, 2011 Secretary of State

Entity Name: BERMUDA ISLES II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

327 EMERALD BAY CR SUITE 5 NAPLES, FL 34110 U

Current Mailing Address: New Mailing Address:

PO BOX 2411

BONITA SPRINGS, FL 34133 US

FEI Number: 65-0483062 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CATTRELL, JERRY 327 EMERALD BAY CR SUITE 5 NAPLES, FL 34110 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: DP

Name: HERBOLD, JOSEPH

Address: 3971 LEEWARD PASSAGE CT #103 City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: DS

Name: SMITH, MARGARET

Address: 3930 LEEWARD PASSAGE CT #103 City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: DVP

Name: BELFIORI, PHILIP

Address: 3940 LEEWARD PASSAGE CT #203 City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: DT

Name: GASS, IRENE

Address: 3951 LEEWARD PASSAGE CT #201 City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: DVP

Name: MCDOWELL, JULIE

Address: 3930 LEEWARD PASSAGE CT #102 City-St-Zip: BONITA SPRINGS, FL 34134 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: JOSEPH HERBOLD PRES 02/16/2011