

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002311

FILED
Apr 14, 2010
Secretary of State

Entity Name: BERMUDA COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

SOUTHWEST PROPERTY MGMT. CORP
1044 CASTELLO DR #206
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

1044 CASTELLO DRIVE
SUITE #206
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-3401617 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MANAGEMENT
1044 CASTELLO DRIVE
SUITE #206
NAPLES, FL 34103 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: RAFFERTY, ROBERT
Address: 480 BERMUDA COVE WAY, #301
City-St-Zip: NAPLES, FL 34110

Title: TD
Name: REYNOLDS, DOUG
Address: 480 BERMUDA COVE WAY, #102B1
City-St-Zip: NAPLES, FL 34110

Title: D
Name: RADOSH, PAT
Address: 480 BERMUDA COVE WAY, #302
City-St-Zip: NAPLES, FL 34110

Title: D
Name: SWARTZ, MARILYN
Address: 575 CLUBSIDE DR., 104B
City-St-Zip: NAPLES, FL 34110

Title: VP
Name: MCCULLOUGH, JUSTIN
Address: 585 CLUBSIDE DR., #203B
City-St-Zip: NAPLES, FL 34110

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: ROBERT RAFFERTY

PD

04/14/2010

Electronic Signature of Signing Officer or Director

Date