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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

N95000005248 (8)

BERMUDA BAY PROPERTY OWNERS' ASSOCIATION, INC.

Mailing Address Principal Place of Business 200 BERMUDA BAY LANE 200 BERMUDA BAY LANE VERO BEACH FL 32963 VERO BEACH FL 32963 3a. Date of Last Report 3. Date Incorporated or Qualified 11/06/1995 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business D. Bos 59-334668 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution Vero 28 23 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No Zıp Country Ζφ 2 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) BARR, JOSEPH R 200 BERMUDA BAY LANE 83 VERO BEACH FL 32963 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. DATE (NO)16 Registered Agent signature required when reinstaling SIGNATURE Signature, typed or printed name of registered agent and little if applicable (12/95) ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Addition Change DELETE 1.1 TiTLE TITLE CR2E037 1.2 NAME BARR, JOSEPH R NAME 1.3 STREET ADDRESS 200 BERMUDA BAY LANE STREET ADDRESS 14 CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP Change Addition DELETE 2 t TITLE TITLE 2.2 NAME MCDONALD, JOHN NAME 2.3 STREET ADDRESS 100 RIVER OAK LANE STREET ADDRESS 2 4 CITY - ST - ZIP VERO BEACH FL 32963 CITY-ST-ZIP Change ■ Addition DELETE 3.1 1111.6 TITLE 3.2 NAME PAPERETH, CHARLES NAME 3.3 STREET ADDRESS 101 HIDDEN OAK LANE STREET ADDRESS VERO BEACH FL 32963 34 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TIFLE TITLE 4 2 NAME PICKETT, ROBERT NAME 4.3 STREET ADDRESS 111 RIVER OAK DRIVE STREET ADDRESS 4 4 CITY - ST - ZIP VERO BEACH FL 32963 ☐ Addition CITY-ST-ZIP Change DELETE 5.1 TITLE TITLE 5.2 NAME RILEY, HOWARD NAME 5.3 STREET ADDRESS 524 SABLE OAK LANE STREET ADDRESS 54 CITY-ST-ZIP VERO BEACH FL 32963 300001849725° -06/04/96--01049--018 Addition CITY-ST-ZIP DELETE 6 1 TITLE TITLE 6.2 NAME NAME ***61.25 6 3 STREET ADDRESS STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE AND PYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if under the certific that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if under the certific that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if under the certific that the information indicated on the certific that the inf