2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2008 8:00 am
Secretary of State

05-23-2008 90019 001 ****61.25

DOCUMENT # N96000004535

1. Entity Name
BERMUDA POINTE ASSOCIATION, INC.

Principal Place of Business
28940 BERNUDA PT. CIR.
BONITA SPRINGS, FL 34134 US

Mailing Address
2335 9TH ST. NO.
#505
NAPLES, FL 34103 US

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

Zip | Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip | Country

01052008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3485147

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GULF VIEW PROPERTY MGMT
2335 9TH ST. NO. #505
NAPLES, FL 34103

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 any, etc. (NOTE: Registered Agent's signature required when resigning) DATE

Filing Fee Is $61.25
Due by May 1, 2008

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	TD CLARK, WANDA 28900 BERMUDA POINT CIR, #103 BONITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NORTON, CHARLES 28940 BERMUDA POINTE CIR., 205 BONITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	PD NORTON, CHARLES, 28940 BERMUDA PT CIR #205, BONITA SP FL 34134 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VPD KOWALSKI, HELEN 28900 BERMUDA POINT CIR, APT 202 BONITA SPRINGS, FL 34134 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	D COLLIER, ROSE, 28910 BERMUDA PT CIRC #103, BONITA SPR FL 34134 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SONNENBERG, WILLIAM 28930 BERMUDA POINTE CIRCLE #6-101 BONITA SPRINGS, FL 34134 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RITTENHOUSE, WILLIAM, 28910 BERMUDA PT CIR #120, BONITA SPR FL 34134 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MENTO, BERYL 14589 SHENANDOAH RIVERVIEW, MI 48192 ☒ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: Charles H. Norton 3/28/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

239-403-7991