2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# N99000005326

Entity Name: BERMUDA BAY II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O STERLING PROPERTY INC.
27180 BY LANDING DRIVE SUITE #4
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

C/O STERLING PROPERTY INC.
27180 BY LANDING DRIVE SUITE #4
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 59-3710724 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'GORMAN, JOHN
C/O STERLING PROPERTY SERVICES
27180 BAY LANDING DRIVE SUITE #4
BONITA SPRINGS, FL 34135 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: VPD ( ) Delete
Name: HUELSMANN, RICHARD
Address: 15525 CEDARWOOD LANE SUITE 101
City-St-Zip: NAPLES, FL 34110

Title: PD ( ) Delete
Name: THOMPSON, WILLIAM
Address: 15475 CEDARWOOD LANE # 201
City-St-Zip: NAPLES, FL 34110

Title: SD ( ) Delete
Name: BOURQUE, JACQUE
Address: 15525 CEDARWOOD LANE # 103
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Delete
Name: SOLTIS, PANSY
Address: 15525 CEDARWOOD LANE # 304
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: WRIGHT, MAURICE
Address: 15515 CEDARWOOD LANE SUITE 302
City-St-Zip: NAPLES, FL 34110

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:

Title: TD (X) Change ( ) Addition
Name: FOREHAND, JOHN
Address: 15575 CEDARWOOD LANE # 204
City-St-Zip: NAPLES, FL 34110

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: WILLIAM THOMPSON DP 03/19/2009

Electronic Signature of Signing Officer or Director — Date