

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000003352

**Entity Name:** BERMUDA DUNES PRIVATE RESIDENCES CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 07, 2024**  
**Secretary of State**  
**5939630721CC**

**Current Principal Place of Business:**

7380 WESTPOINTE BLVD  
ORLANDO, FL 32835

**Current Mailing Address:**

7380 WESTPOINTE BLVD  
ORLANDO, FL 32835 US

**FEI Number: 56-2571660**

**Certificate of Status Desired: No**

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

ARIAS BOSINGER, PLLC  
845 E NEW HAVEN AVE  
MELBOURNE, FL 32901 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: SONA A BOSINGER**

**03/07/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FISH, MICHAEL  
Address        7380 WESTPOINTE BLVD  
City-State-Zip: ORLANDO FL 32835

Title            VP  
Name            TENN SING QUE, CHARMAINE  
Address        7380 WESTPOINTE BLVD  
City-State-Zip: ORLANDO FL 32835

Title            SECRETARY  
Name            CADDEN, JOHN  
Address        7380 WESTPOINTE BLVD  
City-State-Zip: ORLANDO FL 32835

Title            TREASURER  
Name            LEVINE, LINDA  
Address        7380 WESTPOINTE BLVD  
City-State-Zip: ORLANDO FL 32835

Title            DIRECTOR  
Name            GICOLA, PAUL  
Address        7380 WESTPOINTE BLVD  
City-State-Zip: ORLANDO FL 32835

*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: MICHAEL FISH**

**PRESIDENT**

**03/07/2024**

Electronic Signature of Signing Officer/Director Detail

Date