2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002311

Entity Name: BERMUDA COVE CONDOMINIUM ASSOCIATION, INC.

FILED Apr 24, 2014 **Secretary of State** CC7712684231

Current Principal Place of Business:

C/O COMPASS GROUP PROPERTY MGMT.

4851 TAMIAMI TRAIL N STE 400

NAPLES, FL 34103

Current Mailing Address:

C/O COMPASS GROUP PROPERTY MGMT. 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 US

FEI Number: 59-3401617 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMPASS GROUP PROPERTY MANAGEMENT 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title ٧P Title Р

RADOSH, PAT SWARTZ. MARILYN Name Name

Address C/O COMPASS GROUP PROPERTY Address C/O COMPASS GROUP PROPERTY

> MGMT. MGMT.

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title **DIRECTOR** Title **TREASURER** Name HISLE, JACKIE Name TETTE, TOM

Address C/O COMPASS GROUP PROPERTY Address C/O COMPASS GROUP PROPERTY MGMT. MGMT.

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

NAPLES FL 34103 NAPLES FL 34103 City-State-Zip: City-State-Zip:

Title **SECRETARY**

AKERS, CHRISTINE Name

C/O COMPASS GROUP PROPERTY Address

MGMT.

4851 TAMIAMI TRAIL N STE 400

NAPLES FL 34103 City-State-Zip:

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.

Ρ SIGNATURE: MARILYN SWARTZ

Date