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.

PRESIDENT

SIGNATURE: DOUGLAS REYNOLDS

T

Electronic Signature of Signing Officer/Director Detail

me and	Address	of Current	Registered	Agent:

SENTRY MANAGEMENT INC 2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 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.

	••••=•			• ., . =, = • .
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	PRESIDENT, DIRECTOR	Title	SECRETARY, DIRECTOR	
Name	REYNOLDS, DOUGLAS	Name	CAMPBELL, WALTER	
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000	
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779	
Title	TREASURER, DIRECTOR	Title	DIRECTOR	
Name	OSTER, JOE	Name	WHITELY, JOHN	
Address	2180 WEST SR 434 STE 5000	Address	2180 WEST SR 434 STE 5000	
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779	
Title	VP, DIRECTOR			
Name	WHIDDEN, CHRISTINE			
Address	2180 WEST SR 434 STE 5000			
City-State-Zip:	LONGWOOD FL 32779			

Entity Name: BERMUDA COVE CONDOMINIUM ASSOCIATION, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779

DOCUMENT# N9500002311

Current Mailing Address:

2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779 US

FEI Number: 59-3401617

- ----4 D . . Nai

SIGNATURE: JAMES W HART JR

FILED Apr 12, 2017 Secretary of State CC3353716247

04/12/2017

Certificate of Status Desired: No

04/12/2017

Date