## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004535

Entity Name: BERMUDA POINTE ASSOCIATION, INC.

**FILED** Apr 10, 2023 **Secretary of State** 4211051572CC

# **Current Principal Place of Business:**

C/O MOORE PROPERTY MANAGEMENT 5603 NAPLES BLVD. NAPLES, FL 34109

# **Current Mailing Address:**

C/O MOORE PROPERTY MANAGEMENT 5603 NAPLES BLVD. NAPLES, FL 34109 US

FEI Number: 59-3485147 Certificate of Status Desired: No

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

**BONITA SPRINGS FL 34134** 

MOORE PROPERTY MANAGEMENT 5603 NAPLES BLVD. NAPLES, FL 34109 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: GRAHAM NORCOMBE 04/10/2023

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

**SECRETARY** Title Title **TREASURER** PERRY, KAREN Name Name SMITH, DANIEL

Address 28910 BERMUDA POINTE CIR #205 Address 28940 BERMUDA PT CIR 203 City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title **DIRECTOR** Title **PRESIDENT** Name COWAN, JOSH Name SERIE, DAVID 5603 NAPLES BLVD. Address 28950 BERMUDA POINTE CIRCLE Address City-State-Zip: NAPLES FL 34109

Title VP / DIRECTOR Name KOHUT, CRAIG Address 5603 NAPLES BLVD. City-State-Zip: NAPLES FL 34109

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.

04/10/2023 SIGNATURE: SERIE, DAVID **PRESIDENT**