FILED

7.24.01

321698 0862

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATU

Jul 31, 2001 8:00 am Secretary of State **DOCUMENT # 762718** 1. Entity Name 07-31-2001 90241 014 ****61.25 SURF N SUN CONDOMINIUM ASSOCIATION, INC. Mailing Address Principal Place of Business 499 SOUTH ORLANDO AVENUE 490-SOUTH-ORLANDO-AVENUE **UUUUUU**I37 COCOA BEACH FL-02931 COCOA-BEACH FL 22931 2. Principal Place of Business 3. Mailing Address 1617 Cooling Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Melbourne City & State 4. FEI Number Applied For 59-2343044 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 37935 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent pace Coast Property Mannt Street Address (P.O. Box Number is Not Acceptable) BOSS-DESIREE A 499-90UTH ORLANDO AVE GOCOA-BCH Fit 32931 Zip Code 32935 FL Melbourne 8. 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. After September 12, 2001, min. will be \$236.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. (5/01) TITLE Delete TITI F 1775 **BELL. WILLIE** NAME NAME CR2E037 STREET ADDRESS P.O. BOX 560209 N/A STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **ROCKLEDGE FL 32956** IP-D TITLE Delete **Addition** CHERRY, RICHARD charles Fischer NAME STREET ADDRESS 30 YAWL DR STREET ADDRESS 973 Pelican Lane CITY-ST-ZIP Rakledge, FL 32955 COCOA BCH FL CITY-ST-ZIP TITLE STD Delete **Addition** ☐ Change TITLE Jania Carter NAME HALL, RODNEY A NAME 8916 Brackenwood Dr. STREET ADDRESS 8785 LIVE OAK COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Orlando FZ 32829 CAPE CANAVERAL FL 32920 **X**Addition ☐ Delete TITLE ☐ Change Andy Martinika 490 S. Orlando Ave #12 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Cowa Beach, FL 32931 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 provered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like enpowered.