## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N05742

1. Corporation Name

## SURFSIDE 1700 CONDOMINIUM ASSOCIATION, INC.

Fillicipal Flace of busines	30
% DORIS DE BERTRAM	•
1700 GULF WAY, UNIT 3	
ST PETERSBURG BCH FL	33706
***	

Mailing Address

% DORIS DE BERTRAM 1701 GULF WAY, UNIT 3 ST PETERSBURG BCH FL 33706

## Mar 22, 1999 8:00 am **Secretary of State**

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US		03							
— ·	val Place of Business 2a. Mailing Address			3. Date Incorporated or Qualifed 10/19/1984					
21		26 Cuite And III ato		4. FEI Number		1	Applied For		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-2686281			Not Applicable	
22		City & State	<del></del>					Additional	
City & State	Đ	City & State			5. Certifcate of Status Desired		Fee	Required	
			Country		6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees	
24 25 29 30						10. Name and Address of New Registered Agent			
	9. Name and Address of Current	Registered Agenit	81	Name	Harro and Alexander	<u> </u>			
				- Marile					
DEBERTR/	AM, DORIS		82	82 Street Address (P.O. Box Number is Not Acceptable)					
1701 GUL	F WAY UNIT #3		-						
ST. PETER	RBURG BCH FL 33706		83	•					
			84	City			85 Zi	p Code	
					corporation submits this statement for the	FL			
agent. I a	m familiar with, and accept the obligati	ions of, Section 617.0503, Fibrida	a Statutes	•	ration's board of directors. I hereby accept	DATE		<del></del>	
	Signature, typed or printed name of registered agent		egistered Age	nt signature red	quired when reinstating)  ADDITIONS/CHANGES TO OF		D DIREC	TORS IN 12	
12.	OFFICERS AND	D DIRECTORS	1.1 TITLE		ADDITIONO/OFFICE TO GE		Chang		
TITLE	VPD	Detere						_	
NAME	JOHNSON, PAUL		1.2 NAME	l	•				
STREET ADDRESS	1701 GULF WAY #2		1.3 STREE	TADDRESS					
CITY-ST-ZIP	ST. PETE BCH FL		1.4 CITY-8	T-ZIP			☐ Chang	ie	
TITLE	D	☐ DELETE	2.1 TITLE	İ			Chang	e 🗀 Addition	
NAME	DEBERTRAM, DORIS		2.2 NAME	Ì					
. STREET ADDRESS	1701-GULF_WAY,.UNIT-#3		2.3 STREE	TADDRESS .	error e was to see a second of the second				
CITY-ST-ZIP	ST PETERSBURG BCH FL		2.4 CITY-	ST-ZIP		_			
TITLE	D	☐ DELETE	3.1 TITLE	1		-	☐ Chang	je 🗌 Addition	
NAME	ERETT, RICHARD		3.2 NAME						
STREET ADDRESS	1701 GULF WAY UNIT #1		3.3 STREE	T ADDRESS					
CITY-ST-ZIP	ST PETERSBURG BCH FL		3.4. CITY-	ST-ZIP		_			
TITLÉ		☐ DELETE	4.1 TITLE				Chang	ge	
NAME	(		4. 2 NAME						
STREET ADDRESS			4.3 STREE	TADDRESS					
CITY-ST-ZIP			4.4 CITY-5	T-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Chang	ge 🗀 Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	TADDRESS					
CITY-ST-ZIP	1		5.4 CITY-	ST-ZIP					
TITLE	-	☐ DELETE	6.1 TTLE				Chang	ge 🔲 Addition	
NAME			6.2 NAME						
STREET ANDRESS			6.3 STREE	TADORESS	-				
A DIRECT MUURESS									

14. 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 annual report or supplemental annual 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 empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP