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 it 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.

SIGNATURE: KEVIN HARVEY

Electronic Signature of Signing Officer/Director Detail

Oncerbirector Detail.				
	Title	DP	Title	DS
	Name	HARVEY, KEVIN	Name	KAMINSKY, KENNETH
	Address	1441 S OCEAN BLVD.	Address	1441 S. OCEAN BLVD.
	City-State-Zip:	POMPANO BEACH FL 33062	City-State-Zip:	POMPANO BEACH FL 33062
	Title	DVT		
	nue			
	Name	LATTIMER, SCOTT		
	Address	1441 S OCEAN BLVD		
	City-State-Zip:	POMPANO BEACH FL 33062		

Officer/Director Detail ·

SIGNATURE:

### **DOCUMENT# 752166**

Entity Name: SURF RIDER CONDOMINIUM ASSOCIATION, INC.

### **Current Principal Place of Business:**

1441 SOUTH OCEAN BLVD. POMPANO BEACH. FL 33062

### **Current Mailing Address:**

1441 SOUTH OCEAN BLVD. POMPANO BEACH. FL 33062

## FEI Number: 59-2263830

# Name and Address of Current Registered Agent:

HARVEY, KEVIN 1441 SOUTH OCEAN BLVD. POMPANO BEACH, FL 33062 US

Electronic Signature of Registered Agent 62

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.

l h 02/06/2015

PRESIDENT

Date

## FILED Feb 06, 2015 Secretary of State CC3833185992

Certificate of Status Desired: Yes

Date