

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06236

Entity Name: WADE SURFSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

18838 GULF BOULEVARD
INDIAN SHORES BEACH, FL 33785

Current Mailing Address:

C/O LISSA BAILEY
919 S. ROME AVE., #11
TAMPA, FL 33606 US

FEI Number: 59-2535600

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEIL, ALAN
18838 GULF BLVD.
#202
INDIAN SHORES, FL 33785 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title DIRECTOR
Name TAYLOR, JOSEPH
Address 7500 ULMERTON ROAD
SUTIES 6-9
City-State-Zip: LARGO FL 33771

Title DIRECTOR
Name HEMMINGS, CHRIS
Address 1510 S. CLARK AVE.
City-State-Zip: TAMPA FL 33629

Title DIRECTOR, TREASURER,
SECRETARY
Name BAILEY, LISSA
Address 919 S. ROME AVE
#11
City-State-Zip: TAMPA FL 33606

Title DIRECTOR, PRESIDENT
Name NEIL, ALAN
Address 18838 GULF BLVD
#202
City-State-Zip: INDIAN SHORES FL 33785

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.

SIGNATURE: LISSA BAILEY

**DIRECTORY, SECT.,
TREASURER**

01/18/2020

Electronic Signature of Signing Officer/Director Detail

Date