2020 FOREIGN NOT FOR PROFIT	CORPORATION ANNUAL REPORT

#### DOCUMENT# F13000002396

Entity Name: EASTERN SURFING ASSOCIATION, INC.

## Current Principal Place of Business:

37573 JANICE CIRCLE SELBYVILLE, MD 19975

#### **Current Mailing Address:**

37573 JANICE CIRCLE SELBYVILLE, MD 19975

### FEI Number: 05-0392315

## Name and Address of Current Registered Agent:

KEETON, BILL 335 FLAGLER BLVD. LAKE PARK, FL 33403 US Certificate of Status Desired: No

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	BILL KEETON		04/30/2	2020
	Electronic Signature of Registered Agent		Date	Э
Officer/Dire	ctor Detail :			
Title	D	Title	D	
Name	PURKEY, HARRY	Name	AUSTIN, KATHY	
Address	736 SURFSIDE AVE.	Address	12361 BURGESS HILL DR.	
City-State-Zip:	VIRGINIA BEACH VA 23451	City-State-Zip:	JACKSONVILLE FL 32246	
Title	Р	Title	DIRECTOR	
Name	SOMMERS, MICHELLE	Name	LEAR, CECIL	
Address	37573 JANICE CIRCLE	Address	408 FOURTH AVE.	
City-State-Zip:	SELBYVILLE MD 19975	City-State-Zip:	BELMAR NJ 07719	
Title	т	Title	D	
Name	KEETON, WILLIAM	Name	SIMS, THOMAS	
Address	335 FLAGLER BLVD.	Address	440 EDEN DRIVE	
City-State-Zip:	LAKE PARK FL 33403	City-State-Zip:	SANTA ROSA BEACH FL 32459	
Title	D	Title	DIRECTOR	
Name	DELORENZO, ANDREW J	Name	MARTINEZ, PAUL	
Address	20 OCEAN WAY	Address	2505 VIA DEL RAY RD	
City-State-Zip:	ST. AUGUSTINE FL 32080	City-State-Zip:	FERNANDINA BEACH FL 32034	

#### Continues on page 2

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: WILLIAM KEETON

TREASURER

04/30/2020

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 30, 2020 Secretary of State 4865617833CC

### **Officer/Director Detail Continued :**

Title DIRECTOR		Title	DIRECTOR
Name DELUCA, MARIO		Name	CRAIG, BRYAN
Address PO BOX 320031		Address	154 W. THATCH PALM CIRCLE
City-State-Zip: COCOA BEACH FL	L 32931	City-State-Zip:	JUPITER FL 33458
Title DIRECTOR			

	2
Name	MARSH, DOUG
Address	1081 PEARL TREE COURT

City-State-Zip: DELTONA BEACH FL 32725