2016 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT

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 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEETON, BILL 335 FLAGLER BLVD. LAKE PARK, FL 33403 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: BILL KEETON 05/05/2016

Electronic Signature of Registered Agent

Date

FILED May 05, 2016

Secretary of State

CR4268833505

Officer/Director Detail:

Title Title D

PURKEY, HARRY AUSTIN, KATHY Name Name

736 SURFSIDE AVE. 12361 BURGESS HILL DR. Address Address City-State-Zip: JACKSONVILLE FL 32246 VIRGINIA BEACH VA 23451 City-State-Zip:

Title DIRECTOR Title Ρ Name LEAR, CECIL Name SOMMERS, MICHELLE Address 408 FOURTH AVE. Address 37573 JANICE CIRCLE

BELMAR NJ 07719 City-State-Zip: City-State-Zip: SELBYVILLE MD 19975

Title Title Τ

Name FISCHER, BRIAN Name KEETON, WILLIAM Address 416 TRACY CIRCLE 335 FLAGLER BLVD. Address City-State-Zip: NIKOMIS FL 34275 City-State-Zip: LAKE PARK FL 33403

Title Title

Name MARTIN, S. DRAKE ESQ. RILEY, VINCE Name 1701 E. COUNTY HWY 30-A Address Address PO BOX 513 SUITE 201-B

SHALIMAR FL 32579 City-State-Zip: SANTA ROSA BEACH FL 32459 City-State-Zip:

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.

05/05/2016 SIGNATURE: WILLIAM KEETON TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name DELORENZO, ANDREW J Address 400 A1A BEACH BLVD.

City-State-Zip: ST. AUGUSTINE FL 32080