2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 09, 2004 8:00 am **Secretary of State** DOCUMENT # 189001 * - - - - - -1. Entity Name 03-09-2004 90017 022 ***150.00 FORT LAUDERDALE SURF CLUB INC Principal Place of Business Mailing Address 425 BAYSHORE DR 425 BAYSHORE DR FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33304 and refer to 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 59-0769554 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WALKER, ROBERT Street Address (P.O. Box Number is Not Acceptable) 425 BAYSHORE DRIVE UNIT 9 FORT LAUDERDALE FL 33304 Zip Code City 8. The above named epity adomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Z (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition TITLE ☐ Delete TITLE Walker, Robert WALKER, ROBERT NAME NAME 425 Bayshore Drive Unit 26 425 BAYHSHORE DR., UNIT 26 STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL 33304 FORT LAUDERDALE FL 33304 CITY-ST-ZIP CITY-ST-ZIP VΡ 1 Change TITLE ☐ Delete TITLE Addition CUOMO, LINDA NAME Cuomo, Linda NAME 425 Bayshore Drive Unit Ft. Lauderdale, FL 33304 425 BAYHSHORE DR., UNIT 40 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33304 CITY-ST-ZIP Delete TITLE ☐ Change X Addition TITLE NAME IANNELLI, GAETANO NAME Emond, Pierre-425 Bayshore Drive Unit Ft. Lauderdale, FL 33304 STREET ADDRESS STREET ADDRESS 425 BAYSHORE DRIVE UNIT 24 CITY-ST-ZIP CITY-ST-7IP FT. LAUDERDALE FL Delete TITLE ☐ Change Addition TITLE Zampanti, Joseph 425 Bayshore Drive Unit 30 BAGGIERO, STEVEN NAME NAME 425 BAYHSHORE DR., UNIT 17 STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL 33304 FORT LAUDERDALE FL 33304 -CITY-ST-ZIP CITY-ST-ZIP X Change TITLE ☐ Delete Addition . Jette, Marc 425 Bayshore Drive Unit 12 JETTE, MARC NAME NAME 425 BAYHSHORE DR., UNIT 12 STREET ADDRESS STREET ADDRESS Ft. Lauderdale, FL 33304 FORT LAUDERDALE FL 33304 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

FILED

12. 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 report or supplemental 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 of the tempowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayling Phone #