2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740056

FILED Jan 12, 2011 Secretary of State

Entity Name: SURF CREST VILLAGE SERVICE INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

13 JOBIL DRIVE 13 JOBIL DRIVE

ST AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 320804752 US

Current Mailing Address: New Mailing Address:

13 JOBIL DRIVE 13 JOBIL DRIVE

ST AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 320804752 US

FEI Number: 59-1964048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARRELL, CECILIA
36 SEA URCHIN DRIVE
FARRELL, CECILIA
36 SEA URCHIN DRIVE

ST AUGUSTINE, FL 32080 US ST AUGUSTINE, FL 320806956 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: 01/12/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DVP

Name: WATTS, BARBARA Address: 9 TARPON LANE

City-St-Zip: ST AUGUSTINE, FL 32080

Title: PD

Name: FARRELL, CECILIA Address: 36 SEA URCHIN DR.

City-St-Zip: ST AUGUSTINE, FL 320806956

Title: SD

Name: SCHUHLE, JOHN Address: 27 DRUM POINT

City-St-Zip: ST AUGUSTINE, FL 320806956

Title: TD

Name: KASPER, SHARON Address: 29 DRUM POINT CIRCLE

City-St-Zip: SAINT AUGUSTINE, FL 320806956

Title: D

Name: SPOTTSWOOD, CURRAN Address: 19 BARRACUDA DRIVE

City-St-Zip: SAINT AUGUSTINE, FL 320806956

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: SHARON KASPER TD 01/12/2011