

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751714

FILED
Apr 29, 2011
Secretary of State

Entity Name: TOPSIDER RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

75500 OVERSEAS HWY
PO DRAWER 508
ISLAMORADA, FL 33036 US

New Principal Place of Business:

Current Mailing Address:

PO DRAWER 508
ISLAMORADA, FL 33036 US

New Mailing Address:

FEI Number: 59-2078067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, RICHARD
75500 OVERSEAS HWY
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: MCDONALD, BRUCE
Address: 3320 MY AIRY COURT
City-St-Zip: DAVIDSONVILLE, MARYLAN,

Title: VP
Name: BEESON, JOHN
Address: 3223 S. ATLANTIC AVENUE #305
City-St-Zip: COCOA BEACH, FL

Title: D
Name: JEREZ, JOHN
Address: 2781 OAK PARK CIRCLE
City-St-Zip: DAVIE, FL

Title: TD
Name: MCKEAN, RICHARD
Address: 760 CO RT 5
City-St-Zip: PULASKI, NY 13142

Title: D
Name: BOSSO, WILLIAM
Address: 18532 WINDSONG WAY
City-St-Zip: JUPITER, FL 33478

Title: SD
Name: BAUER, SALLY
Address: P.O. BOX 897
City-St-Zip: ISLAMORADA, FL 33036

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: BRUCE MCDONALD

PR

04/29/2011

Electronic Signature of Signing Officer or Director

Date