

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90027 022 ****61.25

DOCUMENT # 756956

1. Entity Name
SAND AND SURF CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2535 S. ATLANTIC AVE.
DAYTONA BEACH SHORES, FL 32118**

Mailing Address
**2535 S. ATLANTIC AVE.
DAYTONA BEACH SHORES, FL 32118**

40018729



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01192007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2726892

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PASKOSKI, JOHN
290 EVANSDALE ROAD
LAKE MARY, FL 32746**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

John J. Paskoski

(NOTE: Registered Agent signature required when reinstating)

DATE

2-10-07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME PASKOSKI, JOHN
STREET ADDRESS 290 EVANSDALE RD
CITY-ST-ZIP LAKE MARY, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME JARVIS, BETTY
STREET ADDRESS 916 ROYAL VIEW CIRCLE
CITY-ST-ZIP WINTER GARDEN, FL 34787

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME NADLER, JACQUE
STREET ADDRESS 600 HILLCREST STREET
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME HALLER, WILBUR
STREET ADDRESS 725 HERBERT ST
CITY-ST-ZIP PORT ORANGE, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME HURST, MARGARET
STREET ADDRESS 10057 CIARCONA- OCOEE ROAD
CITY-ST-ZIP APOPKA, FL 32703

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME COOK, LARRY
STREET ADDRESS 1212 MEUGGA DRIVE
CITY-ST-ZIP PORT ORANGE, FL 32129

TITLE VP ☐ Change ☒ Addition
NAME DUANE ELMORE
STREET ADDRESS P.O. Box 1102
CITY-ST-ZIP DELAND, FL 32720

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or trustee empowered to execute this report as required by Chapter 617, 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:

John J. Paskoski PRES.

Date

Daytime Phone #

2-10-07 407 323 1238