## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Wortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

## EMERALD SURF CONDOMINIUM OWNERS' ASSOCIATION, IN

EMERALD SURF CONDOM C.	INIUM OWNERS' ASSOCIATION, IN				
Principal Place of Business	Mailing Address	- TOO THE TREES STILLS FROM THE STREET SHOW DIDNESS FROM SHOW DIDNESS FROM SHOW	(1111)		
8245 GULF BLVD. NAVARRE BEACH FL 32566	8245 GULF BLVD. NAVARRE BEACH FL 32566	3. Date Incorporated or Qualified  09/01/1981  4. FEI Number  Applied	09/01/1981		
		<b>59-2947134</b> Not Appl			
2. Principal Place of Business 21	2a. Malling Address 26	5. Certificate of Status Desired See Sequired Fee Required			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing \$5.00 May B Trust Fund Contribution  Added to Fees			
City & State	City & State	7. Is this nonprofit corporation a homeowners association?  The second s			
Zip Country 24 25	Zip Country <b>29 30</b>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XX Yes No	6		
	f Current Registered Agent	10. Name and Address of New Registered Agent			
	81 Na	WHO CENTURY 21 ISLAND VIEW REALTY			

NOTTINGHAM, ALLEN 151 WYNNEHAVEN RD. MARY ESTHER FL 32569

Į.		8512 NAV	ARRE 1	PKWY	·			
	84	City NAVA	RRE			FL 8	32566	_

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

**FILED** 

Apr 16 1998 8:00am

Secretary of State

office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
•		Our. R	A 10 0 10	Breker bowner 4	19/90	
SIGNATURE .	Signature, typed or printed name of registered agent and title it appl	icable. (NOTE: F	Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND DIRECTOR	rs	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TITLE	TD	DELETE	1.1 TITLE	VP	Change Addition	
NAME	Larrimore, Lamar		1.2 NAME	1		
STREET ADDRESS	3524 COUNTRY CLUB RD		1.3 STREET ADDRESS			
CITY-ST-ZIP	BIRMINGHAM AL		1.4 CITY-ST-ZIP	}	İ	
TITLE	PD	DELETE	2.1 TITLE		Change Addition	
NAME	RICHARDS, JIM		2.2 NAME			
STREET ADDRESS	5810 HOWELL HIGHLANDS PLACE		2.3 STREET ADDRESS			
CITY ST-ZIP	STONE MOUNTAIN GA		2. 4 CITY-ST-ZIP			
TITLE	\$D	DELETE	3.1 TITLE	SD	Change Addition	
NAME	BURGER, RICHARD		3.2 NAME	BILL WEBSTER		
STREET ADDRESS	252 KEVIN LANE		3.3 STREET ADDRESS	119 LAUREL DR.		
CITY-ST-ZIP	MEDIA PA		3.4. CITY - ST - ZIP	AUBURN AL 36830		
TITLE	VP	DELETE	4.1 TITLE	TD	Change Addition	
NAME	LAGRUA, BROOKS		4, 2 NAME	LLOYD COOPER		
STREET ADDRESS	7416 ROCKY RAVINE DR		4,3 STREET ADDRESS	130 YORKTOWN RD.		
CITY-ST-ZIP	FAIRFAX STATION VA		4.4 CITY-ST-ZIP	FRANKLIN TN 37064-323		
TITLE	D	☐ DELETE	5.1 TITLE		Change Addition	
RAME	WARD, LEWIS		5.2 NAME			
STREET ADDRESS	103 OCALA DR		5.3 STREET ADDRESS	-	Ì	
CITY-ST-ZIP	MONTGOMERY AL		5.4 CITY - ST - ZIP			
TITLE	O allan Ho To Hear ha	☐ DELETE	6.1 TITLE		Change Addition	
NAME	NOTTINGHAM, ALLEN	42	6.2 NAME		ļ	
STREET ADDRESS	151 WYNNEHAVEN RD		6.3 STREET ADDRESS			
CITY-ST-ZIP	MARY ESTHER FL		6.4 CITY-ST-ZIP		İ	

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 annual report or supplemental annual 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 12 or Block 13 if chapped, or on an attact press with an address.

20 Mar 98