

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005542

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** SURFSIDE PALMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8888 COLLINS AVENUE  
SURSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

10556 NW 26 ST D-202  
DORAL, FL 33172

**New Mailing Address:**

**FEI Number:** 65-1048644

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARROM, ORLANDO  
10556 NW 26 STREET  
SUITE 202  
DORAL, FL 33172 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:** P  
**Name:** RIERA, MIGUEL  
**Address:** 8888 COLLINS AVE #406  
**City-St-Zip:** SURFSIDE, FL 33154

**Title:** VP  
**Name:** MARTINEZ, ADRIANA  
**Address:** 8888 COLLINS AVE, # 213  
**City-St-Zip:** SURFSIDE, FL 33154

**Title:** S  
**Name:** PEDRANTI, ANN  
**Address:** 8888 COLLINS AVE #218  
**City-St-Zip:** SURFSIDE, FL 33154

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:** MIGUEL RIERA

P

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date