


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90046 008 ****61.25

DOCUMENT # N02000009104			
1. Entity Name SURF CLUB III CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 21 OLD KINGS ROAD STE B101 PALM COAST, FL 32317		Mailing Address 21 OLD KINGS ROAD STE B101 PALM COAST, FL 32317	
2. Principal Place of Business 60 Surfview Dr.		3. Mailing Address P.O. Box 355030	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Palm Coast, FL		City & State Palm Coast, FL	
4. FEI Number 20-1067312	Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CHIUMENTO, MICHAEL D C/O CHIUMENTO & ASSOC. 4 OLD KINGS ROAD NORTH PALM COAST, FL 32137		7. Name and Address of New Registered Agent Name: RON BROWN - DOBSON & BROWN Street Address (P.O. Box Number is Not Acceptable) 666 CUNA St. - Ste. A City: ST. AUGUSTINE FL Zip Code 32084	
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 _____ DATE _____ <small>Signature, held in power when registered agent filed this report. (NOTE: Registered Agent's signature required when changing)</small>			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY - ST - ZIP	DP HARKINS, WILLIAM 21 OLD KINGS ROAD STE B101 PALM COAST, FL 32317 <input checked="" type="checkbox"/> De ete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES. BLACKWELL, MIKE 110 MURFIELD DR. PONTE VEDRA BEACH, FL 32082 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add'tion
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV ROBINSON, GREG 21 OLD KINGS ROAD STE B101 PALM COAST, FL 32317 <input checked="" type="checkbox"/> De ete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP STRAWN, Bill 4631 SW 94th DR. GAINESVILLE, FL 32608 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add'tion
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST KINKADE, JUDY 21 OLD KINGS ROAD STE B101 PALM COAST, FL 32317 <input checked="" type="checkbox"/> De ete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Sec./TREAS. NEWKIRK, LARRY 3066 BEAUCLORE OAKS DR. S. JACKSONVILLE, FL 32257 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add'tion
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> De ete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add'tion
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> De ete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add'tion
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> De ete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add'tion
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: <u>William C. Strawn VP</u>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

ATTACHMENT

**SURF CLUB III
BOARD OF DIRECTORS
2005**

40034193

N02000009104

NAME/ADDRESS TITLE CONTACT NUMBERS

PRESIDENT

MIKE BLACKWELL
110 MURIFIELD DRIVE
PONTE VEDRA BEACH, FL
32082

HOME - 386-445-9305
WORK -
FAX - 904-543-7618
CELL - 904-982-7053
EMAIL -

VICE PRESIDENT

BILL STRAWN
4631 SOUTHWEST 94TH DR.
GAINESVILLE, FL 32608

HOME - 352-336-5066
WORK - 352-378-3997
CONDO - 386-246-3686
CELL - 352-359-0300
FAX - 352-373-3544
EMAIL -

SECRETARY / TREASURER

LARRY NEWKIRK
3066 BEAUCLERC OAKS DRIVE S.
JACKSONVILLE, FL
32257

CONDO - 386-445-⁶³⁴⁴~~8308~~
CELL - 904-635-7869

ATTACHMENT

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**SURF CLUB III
DIRECTORS
2005**

DIRECTORS

**HAL SEYMOUR
60 SURFVIEW DRIVE #711
PALM COAST, FL
32137**

**HOME – 386-445-4707
FAX – 386 445-3269
EMAIL - HSEYMOURI@CFL.RR.COM**

**PAM NEAL
60 SURFVIEW DRIVE #615
PALM COAST, FL
32137**

HOME – (615) 403-4662

**STEVE WEINTRAUB
8466 PAPELON WAY
JACKSONVILLE, FL
32217**

**HOME – 904-739-9141
EMAIL - MAGFORC001@AOL.COM**

**BILL SHARP
8825 PERIMETER PARK BLVD
#401
JACKSONVILLE, FL
32216**

**HOME – 904-641-3340
WORK – 904-997-1093
CELL – 904-963-1409**