

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 27, 2009
Secretary of State**

DOCUMENT# N02000009104

Entity Name: SURF CLUB III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

60 SURFVIEW DR
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 355030
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 20-1067312 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTINE & CHRISTINE, P.A.
28 CORDOVA ST
SAINT AUGUSTINE, FL 32084 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 () Delete
Name: STRAWN, BILL
Address: 2668 SW 103RD ST
City-St-Zip: GAINESVILLE, FL 32607

Title: T () Delete
Name: NEWKIRK, LARRY
Address: 3066 BEAUCLERE OAKS DR S
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP () Delete
Name: LINDSAY, BECKY
Address: 10112 DUFFY CIR
City-St-Zip: BROOKSVILLE, FL 34163

Title: S () Delete
Name: GALLAGHER, NANCY
Address: 12472-37 RIVER GLEN ROW
City-St-Zip: SAN DIEGO, CA 92111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LARRY NEWKIRK

T

04/27/2009

Electronic Signature of Signing Officer or Director

_____ Date