


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90427 003 ****61.25

DOCUMENT # N23121

1. Entity Name
 SURFWALK OF MARCO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
 1001 S. COLLIER BLVD
 MARCO ISLAND, FL 34145 US

Mailing Address
 P.O. BOX 637
 MARCO ISLAND, FL 34146

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

40080240



04132006 Chg-NP CR2E037 (11/05)

4. FEI Number
 65-0038701

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

STAN REICH
 1001 S. COLLIER BLVD. TH5
 MARCO IS, FL 34145

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006

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: STD Delete
 NAME: LIVENGOOD, MARVA
 STREET ADDRESS: 1001 S COLLIER BLVD., #201
 CITY-ST-ZIP: MARCO ISLAND, FL 34145

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

TITLE: VD Delete
 NAME: MEYER, DANNY
 STREET ADDRESS: 1001 S COLLIER BLVD., #302
 CITY-ST-ZIP: MARCO ISLAND, FL 34145

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

TITLE: PD Delete
 NAME: REICH, STANLEY
 STREET ADDRESS: 1001 S COLLIER BLVD., #TH5
 CITY-ST-ZIP: MARCO ISLAND, FL 34145

TITLE: Change Addition
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 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
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TITLE: Change Addition
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TITLE: Change Addition
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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 my address, with all other like empowered.

SIGNATURE: Stanley Reich, Stanley Reich Date: 4/25/06 Daytime Phone #: 239-442-5400