## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N51276

FILED Apr 30, 2009 Secretary of State

Entity Name: SURF CLUB CONDOMINIUM ASSOCIATION, INC.

US

**Current Principal Place of Business: New Principal Place of Business:** 

104 SURFVIEW DRIVE PALM COAST, FL 32137

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 354434 104 SURFVIEW DRIVE PALM COAST, FL 32137 US PALM COAST, FL 32135 US

FEI Number: 59-3150302 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

**BECKER & POLIAKOFF** C/O JOHN CHRISTENSEN 500 WINDERLEY PLACE STE 104

MAITLAND, FL 32751 US

SOUTHERN STATES MANAGEMENT GRP PALM COAST, FL 32137 US

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: FRED ANNON, JR.

04/30/2009 Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete MANCINELLI, DOROTHY Name: 104 SURFVIEW DR Address: City-St-Zip: PALM COAST, FL 32637

Title: ( ) Delete DEJONG, JANICE Name: Address: 8710 SW 40TH ST AVE City-St-Zip: GAINESVILLE, FL 32608

Title: () Delete SACCARDI, RAY Name: 104 SURVIEW DR 1401 Address: City-St-Zip: PALM COAST, FL 32137

Title: ( ) Delete Name: BULLOCK, BRUCE 2510 HICKORY BLUFF LN Address: City-St-Zip: JACKSONVILLE, FL 32223

Title: () Delete

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

MANCINELLI, DOROTHY Name: Address: POST OFFICE BOX 354434 City-St-Zip: PALM COAST, FL 32135

7 FLORÍDA PARK DRIVE NORTH

ANNON, FRED JR

(X) Change ( ) Addition Title:

Name: DEJONG, JANICE Address: POST OFFICE BOX 354434 City-St-Zip: PALM COAST, FL 32135

Title: (X) Change ( ) Addition

SACCARDI, RAYMOND Name: POST OFFICE BOX 354434 Address: City-St-Zip: PALM COAST, FL 32135

Title: VPD (X) Change ( ) Addition

Name: BULLOCK, BRUCE Address: POST OFFICE BOX 354434 City-St-Zip: PALM COAST, FL 32135

Title: ( ) Change (X) Addition

BOMFORD, ALFRED Name: POST OFFICE BOX 354434 Address: City-St-Zip: PALM COAST, FL 32135

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: RAYMOND SACCARDI Ρ 04/30/2009