

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753976

Entity Name: SURFSIDE OF PINELLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

251 WINDWARD PASSAGE
SUITE F
CLEARWATER, FL 33767

Current Mailing Address:

251 WINDWARD PASSAGE
SUITE F
CLEARWATER, FL 33767 US

FEI Number: 59-2783100

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JIM NOBLES MANAGEMENT, INC.
251 WINDWARD PASSAGE
SUITE F
CLEARWATER, FL 33767 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ROWE, BOBBY
Address 11 IDLEWILE #304
City-State-Zip: CLEARWATER BEACH FL 33767

Title VP
Name MANUS, GEORGE
Address 11 IDLEWILE #601
City-State-Zip: CLEARWATER BEACH FL 33767

Title S, SECRETARY, TREASURER
Name RASCONA, DIXIE
Address 11 IDLEWILE ST #402
City-State-Zip: CLEARWATER FL 33767

Title DIRECTOR
Name ABINGTON, BILL
Address 11 IDLEWILD #404
City-State-Zip: CLEARWATER FL 33767

Title DIRECTOR
Name SHAY, BRIAN
Address 11 IDLEWILD ST. #501
City-State-Zip: CLEARWATER FL 33767

Title DIRECTOR
Name ABINGTON, BILL
Address 11 IDLEWILD #404
City-State-Zip: CLEARWATER FL 33767

Title DIRECTOR
Name SHAY, BRIAN
Address 11 IDLEWILD ST. #501
City-State-Zip: CLEARWATER FL 33767

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: BOBBY ROWE

PRESIDENT

04/10/2015

Electronic Signature of Signing Officer/Director Detail

Date