

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03144

FILED
Jan 10, 2014
Secretary of State
CC5609310391

Entity Name: SURFSIDE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1096 SCENIC GULF DR.
C-101
MIRAMAR BEACH, FL 32550

Current Mailing Address:

1096 SCENIC GULF DR.
C-101
MIRAMAR BEACH, FL 32550 US

FEI Number: 59-2888216

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANCHORS, MICHELLE ESQ.
2113 LEWIS TURNER BLVD - SUITE 100
FORT WALTON BEACH, FL 32547 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 VP
Name ZIMMER, CHRISTOPHER
Address 300 KNOLL WOODS DR
City-State-Zip: ROSWELL GA 30075

Title P
Name GELARDI, ROBERT
Address 1096 SCENIC GULF DR UNIT 1602
City-State-Zip: MIRAMAR BEACH FL 32550

Title D
Name KIRKLAND, CRAIG
Address 4375 HOLLYTREE DR
City-State-Zip: LOUISVILLE KY 40241

Title T
Name OWENS, JOHN
Address 3086 O'BRIEN DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title SEC
Name JIM, VEST
Address 1096 SCENIC GULF DR. UNIT 1002
City-State-Zip: MIRAMAR BEACH FL 32550

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: ROBERT C GELARDI

PRESIDENT

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date