



1441 S. OCEAN BLVD.
POMPANO BEACH, FL 33062
PHONE: 954-785-8991
FAX: 954-782-2338
WEB: surfridercondo.com
EMAIL: customercare@surfridercondo.com

Date: _____

Dear Owner:

As you requested, please find enclosed two In-House Exchange Agreements. Please sign and return one copy along with a check for the amount of **\$200.00** to the Surf Rider Resort, 1441 South Ocean Blvd., Pompano Beach, FL 33062.

Upon receipt of same we shall execute the reservation for your In-House exchange, keep one copy for your records.

If we can be of further assistance, please do not hesitate to contact the front office at 954-785-8991.

Sincerely,

JUDY STORCK

**Surfrider Condominium Association
Resort Manager**



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RE: IN-HOUSE EXCHANGE BETWEEN OWNER AND ASSOCIATION

I(We), _____, Owner(s) of Unit # _____, Week # _____ Contract ID #: _____ give my(our) unit, as an In-House exchange for a Week # _____, in a _____ bedroom unit at the SURF RIDER RESORT, located at 1441 South Ocean Blvd., Pompano Beach, FL 33062 for the year 20__.
WK _____ (**DATES:** _____)

Date: _____ Owner _____
 Owner _____

I (We) understand that the Association has full use of my Unit # _____ Week # _____ in the year 20__.

Date: _____ Owner _____
 Owner _____

I (We) have not RCI-exchanged or Space-banked my Unit # _____ in Week # _____ this year of 20__.

Date: _____ Owner _____
 Owner _____