2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 09, 2003 8:00 am Secretary of State DOCUMENT # 742112 1. Entity Name 04-09-2003 90119 042 ****61.25 SUMMIT COVE CONDOMINIUM ASSO, INC. Principal Place of Business Mailing Address **EUU11**000 8520 U.S. 1 8520 U.S. 1 MICCO FL 32976-9609 MICCO FL 32976-9609 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-1958402 City & State City & State Applied For Not Applicable Żip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BASTIEN, MARCEL Street Address (P.O. Box Number is Not Acceptable) 8520 US HWY 1 MICCO FL 32976 Zip Code City 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 Marce DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. SD ☐ Addition TITLE Carole Chandley Change ☐ Delete TITLE MCCABE, TERESA NAME NAME 8520 U.S.Hwy1 #G9 STREET ADDRESS 8520 US HWY 1, #G7 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MICCO FL 32976 Micco, Fl. 32976 PD TITLE TITLE ☐ Defete Change ☐ Addition ADAMS, JOHN NAME . NAME Dorothy Coolidge STREET ADDRESS 8520 US HWY 1, #H3 STREET ADDRESS 8520 U.S.Hwy1 #C4 Micco, Fl. 32976 CITY-ST-ZIP MICCO FL 32976 CITY-ST-ZIP ☐ Delete TITLE Change Addition D-----SCANLAN, JOE NAME NAMÊ Marcel Bastien STREET ADDRESS 8520 US HIGHWAY 1 #C10 STREET ADDRESS 8520 U.S.Hwy1 #D2 CITY-ST-ZIP CITY-ST-ZIP MICCO FL 32976 Micco, Fl. 32976 VD. ☐ Delete TITLE ☐ Change Addition GWINN, IDA NAME NAME STREET ADDRESS 8520 US HWY 1 #C12 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MICCO FP 32976 ☐ Addition TITLE ☐ Delete TITI F ☐ Change MARSHALL, JEANNE NAME NAME STREET ADDRESS 8520 U.S. HWY 1 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MICCO FL 32976 n TITLE Delete TITLE ☐ Change Addition LEBLANC, LISE NAME NAME STREET ADDRESS 8520 US HWY 1, #A3 STREET ADDRESS

FILED

SIGNATURE Mgr Therese Martin 772-664-9747

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changed, or on an attachment with an address, with all other like empowered.

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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