2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005935

FILED Jan 06, 2004 Secretary of State

Entity Name: SUMMERVIEW OAKS PROPERTY OWNER'S ASSOCIATION, INC.

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

201 14TH AVENUE S.E. SUITE #H RUSKIN, FL 33570

Current Mailing Address: New Mailing Address:

PO BOX 771 P.O. BOX 2008

RUSKIN, FL 33575 RIVERVIEW, FL 33568

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

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

PFEIFFER, EARL A 201 14TH AVENUE S.E. SUITE H RUSKIN, FL 33570

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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: P (X) Change () Addition
Name: PFEIFFER, EARL A Name: PFEIFFER, EARL A

 Address:
 PO BOX 771
 Address:
 PO BOX 771

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:
 RUSKIN, FL 33575

Title: D () Delete Title: VP (X) Change () Addition Name: FIGUEROA, HOPE Name: FIGUEROA, HOPE

 Address:
 PO BOX 771
 Address:
 PO BOX 771

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:
 RUSKIN, FL 33575

Title: D () Delete Title: TR (X) Change () Addition Name: MCKAMEY, KATHRYN Name: MCKAMEY, KATHRYN

 Address:
 PO BOX 771
 Address:
 PO BOX 771

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:
 RUSKIN, FL 33575

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 ORTIZ, VANESSA

 Address:
 Address:
 P.O. BOX 771

 City-St-Zip:
 City-St-Zip:
 RUSKIN, FL 33575

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VANESSA ORTIZ D 01/06/2004