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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N11634 1. Corporation Name SUMMIT RUN HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 1321 SUMMIT PINES BLVD W PALM BCH. FL 33415-3636			Mailing Address 1321 SUMMIT PINES BLVD W PALM BCH. FL 33415-3636		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country 28		3. Date Incorporated or Qualified 10/17/1985 4. FEI Number 59-2683007 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent LADWIG, PATTI H 1646 PALM BEACH LAKES BLVD SUITE 640 WEST PALM BEACH FL 33401			10. Name and Address of New Registered Agent 81 Name Patti Heidler Ladwig 82 Street Address (P.O. Box Number is Not Acceptable) 12765 W. Forest Hill Blvd 83 Suite 1317 84 City Wellington FL 85 Zip Code 33414		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE <i>Patti Heidler Ladwig</i> Patti Heidler Ladwig DATE 3/11/99 Signature, typed or printed name of registered agent and title if applicable (NO "E" Registered Agent signature required when reappointing)					
12. OFFICERS AND DIRECTORS TITLE PB ☐ DELETE NAME ELLIS, MARY C. STREET ADDRESS 1359 PINES LANE CITY-ST-ZIP W PALM BCH. FL 33415 TITLE S ☐ DELETE NAME HAWLEY, ROSEMARY STREET ADDRESS 1383 SUMMIT RUN CIR CITY-ST-ZIP W. PALM BEACH FL 33415 TITLE VPD ☐ DELETE NAME BERNHARD, LEONARD STREET ADDRESS 1442 SUMMIT RUN CIRCLE CITY-ST-ZIP W. PALM BCH FL 33415 TITLE T ☐ DELETE NAME SEBASTIANO, PAUL STREET ADDRESS 5280 KIM CT. CITY-ST-ZIP WEST PALM BEACH FL 33415 TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE TD ☒ Change ☐ Addition 1.2 NAME Ellis, Mary C. 1.3 STREET ADDRESS 1359 Pines Lane 1.4 CITY-ST-ZIP W. Palm Beach, FL 33415 2.1 TITLE SD ☒ Change ☐ Addition 2.2 NAME Hawley, Rosemary 2.3 STREET ADDRESS 1383 Summit Run Cir. 2.4 CITY-ST-ZIP W. Palm Beach, FL 33415 3.1 TITLE PD ☒ Change ☐ Addition 3.2 NAME Bernhard, Leonard 3.3 STREET ADDRESS 1442 Summit Run Circle 3.4 CITY-ST-ZIP W. Palm Beach, FL 33415 4.1 TITLE VPD ☒ Change ☐ Addition 4.2 NAME Sebastiano, Paul 4.3 STREET ADDRESS 5280 KIM COURT 4.4 CITY-ST-ZIP W. PALM BEACH, FL 33415 5.1 TITLE ASST. SEC. D ☐ Change ☒ Addition 5.2 NAME NELSON SANTIAGO 5.3 STREET ADDRESS 1343 SUMMIT RUN CIRCLE 5.4 CITY-ST-ZIP W. PALM BEACH, FL 33415 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary C. Ellis* **REMIARRELLIS**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1599 561-699-2768
Date Daytime Phone

CR2E037 (1/98)