

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30036

FILED
Jul 06, 2006
Secretary of State

Entity Name: SUMMERWOOD HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

836 SUMMERWOOD DRIVE
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

836 SUMMERWOOD DR.
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 65-0130789 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CONARD, CYNTHIA H
836 SUMMERWOOD DR
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: KELLY, SCOTT
Address: 887 SUMMERWOOD DR
City-St-Zip: JUPITER, FL 33458

Title: VP () Delete
Name: ENGLISH, KATHY
Address: 852 SUMMERWOOD DR
City-St-Zip: JUPITER, FL 33458

Title: T () Delete
Name: MCGOVERN, JOY
Address: 863 SUMMERWOOD DRIVE
City-St-Zip: JUPITER, FL 33458

Title: S () Delete
Name: SUTHERLAND, JENNY
Address: 825 SUMMERWOOD DRIVE
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVID, SUTHERLAND
Address: 825 SUMMERWOOD DRIVE
City-St-Zip: JUPITER, FL 33458

Title: VP (X) Change () Addition
Name: DAVID, SHOCKLEY
Address: 848 SUMMERWOOD DR
City-St-Zip: JUPITER, FL 33458

Title: T (X) Change () Addition
Name: CONARD, CYNTHIA
Address: 836 SUMMERWOOD DRIVE
City-St-Zip: JUPITER, FL 33458

Title: S (X) Change () Addition
Name: ALLISON, SIMONS
Address: 888 SUMMERWOOD DRIVE
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CYNTHIA CONARD

T

07/06/2006

Electronic Signature of Signing Officer or Director

Date