2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003805

FILED Apr 12, 2007 Secretary of State

Entity Name: SUMMERPORT COMMERCIAL PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2180 W SI	₹ 434			
STE 5000 .ONGWO	OD, FL 32779	1		
Current Mailing Address:		New Mailing Address:		
2180 W SI	₹ 434			
STE 5000 .ONGWO	OD, FL 32779			
El Number	: 46-0487572	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
HART, JAI 2180 W SI	MES W JR			
STE 5000	R 434 OD, FL 32779	US		
STE 5000 .ONGWO he above	OD, FL 32779		purpose of changing its registere	d office or registered agent, or both,
STE 5000 ONGWO The above n the State	OD, FL 32779 named entity e of Florida. RE:	submits this statement for the		
STE 5000 ONGWO The above In the State	OD, FL 32779 named entity e of Florida. RE:			d office or registered agent, or both, Date
STE 5000 ONGWO The above In the State	OD, FL 32779 named entity e of Florida. RE:	submits this statement for the	ent	
STE 5000 ONGWO The above In the State	OD, FL 32779 named entity of the following states and the following states are set on the following states and the following states are set on the following s	submits this statement for the nic Signature of Registered Action TORS: Delete EVAN I ST STE 200	ent	Date
TE 5000 ONGWO The above The State SIGNATUI DFFICER ittle: lame: ddress:	oD, FL 32779 named entity set of Florida. RE: Electron S AND DIREC PD (1) RABINOWITZ, 1951 NW 19TH BOCA RATON,	submits this statement for the nic Signature of Registered Ag TORS:) Delete EVAN ST STE 200 FL 33431) Delete BO ST STE 200	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: EVAN RABINOWITZ PD 04/12/2007