

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005990

FILED
Apr 01, 2009
Secretary of State

Entity Name: SUMMIT LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

314 NE 3RD ST
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

314 NE 3RD ST
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 65-1070281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST. JOHN, CORE & LEMME, P.A.
1601 FORUM PLACE, STE. 701
WEST PALM BEACH, FL 33401 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: VP () Delete
Name: KERIN, ROY
Address: 918 SUMMIT LAKE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: PD () Delete
Name: WALLACE, ANDREW
Address: 836 SUMMIT LAKE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: SDTD () Delete
Name: CHIN, KEISHA
Address: 960 SUMMIT LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: DEBIASIO, GLENN
Address: 867 SUMMIT LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: GAMLIN, TOM
Address: 830 SUMMIT LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SHERI MCKENZIE

BKPR

04/01/2009

Electronic Signature of Signing Officer or Director

Date