#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 762434** 

Entity Name: SUMMERWIND CONDOMINIUM OF COCOA BEACH, INC.

FILED
Apr 01, 2024
Secretary of State
2891172788CC

### **Current Principal Place of Business:**

2090 N. ATLANTIC AVE. COCOA BEACH. FL 32931

## **Current Mailing Address:**

785 W. GRANADA BLVD, SUITE 5 ORMOND BEACH. FL 32174 US

FEI Number: 36-3218811 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SOUTHERN STATES MANAGEMENT GROUP, INC. 785 W. GRANADA BLVD, SUITE 5 ORMOND BEACH, FL 32174 US

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: JEFFREY ANNON 04/01/2024

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

TitleVPTitlePRESIDENTNameOLSON, ALNameTRUONG, PHONG

Address 785 W. GRANADA BLVD, SUITE 5 Address 785 W. GRANADA BLVD, SUITE 5
City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174

Title MANAGER. NON BOARD MEMBER Title **TREASURER** Name PARKHURST, CHRISTOPHER Name BACZEK, ANDREA Address 785 W. GRANADA BLVD, SUITE 5 Address 785 W. GRANADA BLVD, SUITE 5 ORMOND BEACH FL 32174 City-State-Zip: City-State-Zip: ORMOND BEACH FL 32174

Title SECRETARY Title DIRECTOR

Name LEGENDRE, KENNETH Name KELLOGG, MELISSA

Address 785 W. GRANADA BLVD, SUITE 5 Address 785 W. GRANADA BLVD, SUITE 5
City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174

I hereby 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 all other like empowered.

SIGNATURE: TRUONG, PHONG