

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006360

Entity Name: SUMMIT OF SAWGRASS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**928 E NEW HAVEN AVE
MELBOURNE, FL 32901**Current Mailing Address:**928 E NEW HAVEN AVE
MELBOURNE, FL 32901 US**FEI Number: 59-3646793****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SPACE COAST PROPERTY MANAGEMENT OF BREVARD
928 E NEW HAVEN AVE
MELBOURNE, FL 32901 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: CYTHIA MARRS****04/07/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name FRAVEL, JOHN
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title TREA
Name DRAGO, JOSEPH
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title VP
Name HARGROVE, LINDA
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name ZASTROW, NATE
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name FINN, STEVE
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY
Name MANLEY, RICK
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

Title DAL
Name NAPERS, MICHELLE
Address 928 E NEW HAVEN AVE
City-State-Zip: MELBOURNE FL 32901

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: JOSEPH DRAGO**TREASURER****04/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date