

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000002501

**Entity Name:** THE VILLAGES AT SUMMER LAKES HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Jan 31, 2013**  
**Secretary of State**  
**CC0780075871**

**Current Principal Place of Business:**

1942 W COUNTY ROAD 419, SUITE 1030  
OVIEDO, FL 32766

**Current Mailing Address:**

1942 W COUNTY ROAD 419, SUITE 1030  
OVIEDO, FL 32766 US

**FEI Number: 59-3714070**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

COMMUNITY MANAGEMENT SPECIALISTS, INC.  
1942 W COUNTY ROAD 419, SUITE 1030  
OVIEDO, FL 32766 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: KEVIN M. DAVIS

01/31/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ELVEN, MARK  
Address 1942 W COUNTY ROAD 419, SUITE 1030  
City-State-Zip: OVIEDO FL 32766

Title T  
Name MENDOZA, MICHELLE  
Address 1942 W COUNTY ROAD 419, SUITE 1030  
City-State-Zip: OVIEDO FL 32766

Title S  
Name NIEVES, EDWIN  
Address 1942 W COUNTY ROAD 419, SUITE 1030  
City-State-Zip: OVIEDO FL 32766

*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: MARK ELVEN /KEVIN DAVIS

P / AGENT

01/31/2013

Electronic Signature of Signing Officer/Director Detail

Date