2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01279

Entity Name: SUMMERWINDS OF JUPITER HOMEOWNERS ASSOCIATION,

INC.

FILED
Mar 27, 2018
Secretary of State
CC6324306218

Current Principal Place of Business:

C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC

140 INTRACOASTAL POINTE DR. SUITE 306

JUPITER, FL 33477

Current Mailing Address:

C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306 JUPITER, FL 33477 US

FEI Number: 59-2532782 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIELDS & BACHOVE PLLC 4440 PGA BLVD STE 308

PALM BEACH GARDENS, FL 33410 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

LLC

Title PRESIDENT Title DIRECTOR

Name MICOLO, KIMBERLEE Name CLARK, CHARLIE

Address C/O REALTIME PROPERTY Address C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, MANAGEMENT OF SOUTH FLORIDA.

LLC LLC

140 INTRACOASTAL POINTE DR. 140 INTRACOASTAL POINTE DR.

SUITE 306 SUITE 306

City-State-Zip: JUPITER FL 33477 City-State-Zip: JUPITER FL 33477

Title SECRETARY Title VP

Name LAUDERBACK, PAM Name HEISSNER, LYNN

Address C/O REALTIME PROPERTY Address C/O REALTIME PROPERTY

MANAGEMENT OF SOUTH FLORIDA, MANAGEMENT OF SOUTH FLORIDA,

140 INTRACOASTAL POINTE DR. 140 INTRACOASTAL POINTE DR.

SUITE 306 SUITE 306

City-State-Zip: JUPITER FL 33477 City-State-Zip: JUPITER FL 33477

TitleDIRECTORTitleTREASURERNameMAZOTTA, ELLIENamePALMER, JILL

Address C/O REALTIME PROPERTY Address C/O REALTIME PROPERTY

MANAGEMENT OF SOUTH FLORIDA, MANAGEMENT OF SOUTH FLORIDA,

HC

FRACCACTAL BOWLTE BB

140 INTRACOASTAL POINTE DR. 140 INTRACOASTAL POINTE DR. SUITE 306 SUITE 306

E 306 SUITE

City-State-Zip: JUPITER FL 33477 City-State-Zip: JUPITER FL 33477

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: KIMBERLEE MICOLO PRESIDENT 03/27/2018