

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01279

FILED
Mar 18, 2013
Secretary of State
CC6705784987**Entity Name:** SUMMERWINDS OF JUPITER HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**PLAZA 222 SOUTH
US HIGHWAY #1 STE #7
TEQUESTA, FL 33469**Current Mailing Address:**PO BOX 3543
TEQUESTA, FL 33469 US**FEI Number: 59-2532782****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JOHNSON, NANCY E
PLAZA 222 SOUTH
US HWY #1 STE #7
TEQUESTA, FLORIDA, FL 33469 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 :**Title PRESIDENT
Name MCLOUGHLIN, ANDREW
Address 1102 SUMMERWINDS LANE
City-State-Zip: JUPITER FL 33458Title DIRECTOR
Name LYNN, HEISSNER
Address 1201 SUMMERWINDS LANE
City-State-Zip: JUPITER FL 44358Title TREASURER
Name SPENCER, VIRGINIA
Address 801 SUMMERWINDS LN
City-State-Zip: JUPITER FL 33458Title DIRECTOR
Name GROSS, EDWARD
Address 1203 SUMMERWINDS LN
City-State-Zip: JUPITER FL 33458Title SECRETARY
Name MAZZOTA, ELLEN
Address 1104 SUMMERWINDS LANE
City-State-Zip: JUPITER FL 33458Title DIRECTOR
Name WASSILY-SOUTIRY, ANGELE
Address 701 SUMMERWINDS LANE
City-State-Zip: JUPITER FL 33458

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: LYNN HEISSNER**DIRECTOR****03/18/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date