

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006191

**Entity Name:** SUMMERPORT RESIDENTIAL PROPERTY OWNERS' ASSOCIATION, INC.**FILED**  
**Jan 17, 2018**  
**Secretary of State**  
**CC7641873170****Current Principal Place of Business:**8390 CHAMPIONS GATE BLVD  
SUITE 304  
CHAMPIONS GATE, FL 33896**Current Mailing Address:**8390 CHAMPIONS GATE BLVD  
SUITE 304  
CHAMPIONS GATE, FL 33896 US**FEI Number: 04-3709524****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**AEGIS COMMUNITY MANAGEMENT SOLUTIONS, INC.  
8390 CHAMPIONS GATE BLVD  
SUITE 304  
CHAMPIONS GATE, FL 33896 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: DAVID BURMAN****01/17/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** PRESIDENT  
**Name** LOEFFERT, JEFF  
**Address** 8390 CHAMPIONS GATE BLVD  
SUITE 304  
**City-State-Zip:** CHAMPIONS GATE FL 33896**Title** SECRETARY  
**Name** RYEL, SCOTT  
**Address** 8390 CHAMPIONS GATE BLVD  
SUITE 304  
**City-State-Zip:** CHAMPIONS GATE FL 33896**Title** VP  
**Name** FISHER, STEVEN  
**Address** 8390 CHAMPIONS GATE BLVD  
SUITE 304  
**City-State-Zip:** CHAMPIONS GATE FL 33896**Title** TREASURER  
**Name** PERAKES, NICK  
**Address** 8390 CHAMPIONS GATE BLVD  
SUITE 304  
**City-State-Zip:** CHAMPIONS GATE FL 33896**Title** VP  
**Name** WOLF, SCOTT  
**Address** 8390 CHAMPIONS GATE BLVD  
SUITE 304  
**City-State-Zip:** CHAMPIONS GATE FL 33896

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: JEFF LOEFFERT****PRESIDENT****01/17/2018**

Electronic Signature of Signing Officer/Director Detail

Date