## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006191

**Entity Name: SUMMERPORT RESIDENTIAL PROPERTY OWNERS'** 

ASSOCIATION, INC.

**Current Principal Place of Business:** 

14501 BLUEBIRD PARK ROAD WINDERMERE, FL 32786

**Current Mailing Address:** 

14501 BLUEBIRD PARK ROAD WINDERMERE, FL 32786

FEI Number: 04-3709524 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARMSTRONG, JANICE C 1001 N LAKE DESTINY RD STE 125 MAITLAND, FL 32751 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

FILED Jan 25, 2016

**Secretary of State** 

CC0233352928

Officer/Director Detail:

Title SECRETARY Title TREASURER

Name FISHER, STEVE Name LOMBARDO, JOHN

Address 14501 BLUEBIRD PARK ROAD Address 14501 BLUEBIRD PARK ROAD

City-State-Zip: WINDERMERE FL 34786 City-State-Zip: WINDERMERE FL 34786

Title VP Title DIRECTOR

Name PROTO, BARBARA Name LOEFFERT, JEFF

Address 14501 BLUEBIRD PARK ROAD Address 14501 BLUEBIRD PARK ROAD

City-State-Zip: WINDERMERE FL 34786 City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name PERAKES, NICK

Address 14501 BLUEBIRD PARK ROAD

City-State-Zip: WINDERMERE FL 34786

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: STEVE FISHER SECRETARY

Electronic Signature of Signing Officer/Director Detail

TARY 01/25/2016

Date