2017 TEORIDA NOTTOR TROTT CORT CRATCH ANNOAE REFORT
DOCUMENT# N0200006464
Entity Name: SUMMER PLACE ESTATES HOMEOWNER'S ASSOCIATION, INC.
Current Principal Place of Business:

2017 ELORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

108 EGLIN PKWY SE FORT WALTON BEACH, FL 32548

## **Current Mailing Address:**

POST OFFICE BOX 4457 FT. WALTON BEACH, FL 32549

# FEI Number: 20-1528324

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

PORTER, DOROTHY A 489 HANOVER PORT LANE FORT WALTON BEACH, FL 32547 US FILED May 25, 2017 Secretary of State CC4829869427

Certificate of Status Desired: Yes

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

# **Officer/Director Detail :**

Oncer/Director Detail.				
Title	P	Title	VP	
Name	HENRY, JOHN	Name	SHEETS, PAM	
Address	1954 KADIMA CIR	Address	1938 KADIMA CIR	
City-State-Zip:	FORT WALTON BEACH FL 32547	City-State-Zip:	FORT WALTON BEACH FL 32547	
Title	т	Title	S	
Title Name	T PORTER, DOROTHY A	Title Name	S GORDON, JUSTIN A	
	T PORTER, DOROTHY A 489 HANOVER PORT LANE		-	
Name Address	- ,	Name	GORDON, JUSTIN A	

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: DOROTHY A. PORTER

TREASURER

Date

Electronic Signature of Signing Officer/Director Detail

Date