## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009543

Entity Name: SUMMER RIDGE HOMEOWNERS. ASSOCIATION, INC.

**FILED** Apr 10, 2019 **Secretary of State** 8747475873CC

# **Current Principal Place of Business:**

161 GOLDSBY RD SUITE C2

SANTA ROSA BEACH, FL 32459

## **Current Mailing Address:**

161 GOLDSBY RD SUITE C2

SANTA ROSA BEACH, FL 32459 US

FEI Number: 54-2086033 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LOCAL ASSOCIATION MANAGEMENT LLC 161 GOLDSBY RD SUITE C2 SANTA ROSA BEACH FL 32459 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: JARED WALKER 04/10/2019

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title Title **PRESIDENT** 

LISTON, WILLIAM LONG, CURTIS (WADE) Name Name

161 GOLDSBY RD 161 GOLDSBY RD Address Address SUITE C2

SUITE C2

City-State-Zip: SANTA ROSA BEACH FL 32459 City-State-Zip: SANTA ROSA BEACH FL 32459

Title **TREASURER** Name BROWN, BRIAN Address 161 GOLDSBY RD

SUITE C2

City-State-Zip: SANTA ROSA BEACH FL 32459

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.