#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006709

Entity Name: SUMMERBROOKE PROPERTY OWNER'S ASSOCIATION, INC.

FILED
Mar 05, 2015
Secretary of State
CC4621546697

## **Current Principal Place of Business:**

5240NE 14TH COURT OCALA, FL 34479

# **Current Mailing Address:**

5240 NE 14TH COURT OCALA, FL 34479 US

FEI Number: 34-2013139 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

TENTERS, STANLEY 1426 NE 51ST LOOP OCALA, FL 34479 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 T Title

NameOSTERBRINK, PATRICIANameQUINTERN, ELIZABETHAddress5220 NE 14TH COURTAddress5240 NE 14TH COURTCity-State-Zip:OCALA FL 34479City-State-Zip:OCALA FL 34479

Title D Title P

 Name
 HOPKINS, MICHAEL
 Name
 QUINTERN, STANLEY

 Address
 5240 NE 11TH AVE
 Address
 5240 NE 14TH COURT

 City-State-Zip:
 OCALA FL 34479
 City-State-Zip:
 OCALA FL 34479

Title VP Title [

NameSTEELE, SCOTTNameVACHON, LUCYAddress1379 NE 51ST LOOPAddress5241 NE 11TH AVECity-State-Zip:OCALA FL 34479City-State-Zip:OCALA FL 34479

Title DIRECTOR

Name FAGUNDO, LAUREN
Address 1403 NE 51ST LOOP
City-State-Zip: OCALA FL 34479

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: PATRICIA OSTERBRINK TREA

Electronic Signature of Signing Officer/Director Detail

TREASURER

S

03/05/2015

Date