

**2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N03000006709

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

**Current Principal Place of Business:**

1379 NE 51ST LOOP  
OCALA, FL 34479

**Current Mailing Address:**

1237 NE 51ST LOOP  
OCALA, FL 34479 US

**FEI Number:** 34-2013139

**Certificate of Status Desired:** Yes

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

WEEKS, SCOTT  
1379 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:** SCOTT WEEKS

07/18/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name OSTERBRINK, PATRICIA  
Address 5220 NE 14TH COURT  
City-State-Zip: Ocala FL 34479

Title PRESIDENT  
Name WEEKS, SCOTT  
Address 1237 NE 51ST LOOP  
City-State-Zip: Ocala FL 34479

Title TREASURER  
Name CONNER, BRENDA  
Address 5210 NE 11TH AVE  
City-State-Zip: Ocala FL 34479

Title SECRETARY  
Name GIBSON, JAMIE  
Address 1261 NE 51ST LOOP  
City-State-Zip: Ocala FL 34479

Title DIRECTOR  
Name SHEFFIELD, WILLIAM  
Address 5211 NE 11TH AVE  
City-State-Zip: Ocala FL 34479

Title DIRECTOR  
Name MERTON, BRUCE  
Address 1402 NE 51ST LOOP  
City-State-Zip: Ocala FL 34479

Title DIRECTOR  
Name HOPKINS, MICHAEL  
Address 5240 NE 11TH AVE  
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:** BRENDA CONNER

TREASURER

07/18/2017

Electronic Signature of Signing Officer/Director Detail

Date