

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006709

Entity Name: SUMMERBROOKE PROPERTY OWNER'S ASSOCIATION, INC.**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:**QUINTERN, STANLEY
5240 NE 14TH CT
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:** STANLEY QUINTERN

04/13/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title S
Name QUINTERN, ELIZABETH
Address 5240 NE 14TH COURT
City-State-Zip: Ocala FL 34479

Title D
Name HOPKINS, MICHAEL
Address 5240 NE 11TH AVE
City-State-Zip: Ocala FL 34479

Title P
Name QUINTERN, STANLEY
Address 5240 NE 14TH COURT
City-State-Zip: Ocala FL 34479

Title VP
Name STEELE, SCOTT
Address 1379 NE 51ST LOOP
City-State-Zip: Ocala FL 34479

Title D
Name VACHON, LUCY
Address 5241 NE 11TH AVE
City-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

TREASURER

04/13/2016

Electronic Signature of Signing Officer/Director Detail

Date