2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04058

Entity Name: SUMMERFIELD MASTER COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

13011 SUMMERFIELD BLVD.
RIVERVIEW, FL 33579

Current Mailing Address:

13011 SUMMERFIELD BLVD.
RIVERVIEW, FL 33579 US

FEI Number: 59-2479864

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUARTE, III, ANTONIO   ESQUIRE
6221 LAND O LAKES BLVD
LAND O LAKES, FL 34638 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	PRESIDENT		Title	VP
Name	ROWLAND, PHILLIP		Name	PERSON, DALE
Address	13011 SUMMERFIELD BLVD.		Address	13011 SUMMERFIELD BLVD.
City-State-Zip:	RIVERVIEW FL 33579		City-State-Zip:	RIVERVIEW FL 33579
Title	SECRETARY		Title	DIRECTOR
Name	GHAHARY, ELIZABETH		Name	RAMNAUTH, ERIK
Address	13011 SUMMERFIELD BLVD.		Address	13011 SUMMERFIELD BLVD.
City-State-Zip:	RIVERVIEW FL 33579		City-State-Zip:	RIVERVIEW FL 33579
Title	TREASURER		Title	DIRECTOR
Name	ZEIGLER-BROWN, DEENA		Name	MCLEOD, BYRON
Address	13011 SUMMERFIELD BLVD.		Address	13011 SUMMERFIELD BLVD.
City-State-Zip:	RIVERVIEW FL 33579		City-State-Zip:	RIVERVIEW FL 33579
Title	DIRECTOR			
Name	HARDEN, CYNTHIA			
Address	13011 SUMMERFIELD BLVD.			
City-State-Zip:	RIVERVIEW FL 33579			

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: PHILLIP ROWLAND   PRESIDENT   04/15/2024
_____
Electronic Signature of Signing Officer/Director Detail   Date