## 2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# N13778

Entity Name: SUMMER LAKES HOMEOWNERS ASSOCIATION OF ORLANDO,

**Current Principal Place of Business:** 

461 A1A BEACH BLVD. ST. AUGUSTINE, FL 32080

**Current Mailing Address:** 

461 A1A BEACH BLVD.

ST. AUGUSTINE, FL 32080 US

FEI Number: 59-2877217 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUMPKIN, ELLEN 461 A1A BEACH BLVD ST AUGUSTINE, FL 32080 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

**FILED** Apr 25, 2017

**Secretary of State** CC4561206519

Officer/Director Detail:

**PRESIDENT** Title Title **SECRETARY** 

COOPER, MIKE Name Name GOODEN, CHRIS

Address C/O SOVEREIGN & JACOBS Address C/O SOVEREIGN & JACOBS 461 A1A BEACH BLVD.

461 A1A BEACH BLVD.

ST. AUGUSTINE FL 32080 ST. AUGUSTINE FL 32080 City-State-Zip: City-State-Zip:

Title VΡ Title **TREASURER** 

FREY, JOEL AGAHDEL, KOUROSH Name Name

C/O SOVEREIGN & JACOBS C/O SOVEREIGN & JACOBS Address Address

461 A1A BEACH BLVD. 461 A1A BEACH BLVD.

ST. AUGUSTINE FL 32080 ST. AUGUSTINE FL 32080 City-State-Zip: City-State-Zip:

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.

04/25/2017 SIGNATURE: MIKE COOPER **PRESIDENT**