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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARISSE A. HENDERSON

Electronic Signature of Signing Officer/Director Detail

VP

03/01/2017

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 655303

Entity Name: SUMMIT HOTEL MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

122 FOURTH AVE SUITE 101 INDIALANTIC, FL 32903

Current Mailing Address:

P O BOX 33547 INDIALANTIC, FL 32903 US

FEI Number: 59-1986853

Name and Address of Current Registered Agent:

HENDERSON, CHARISSE A 122 FOURTH AVE STE 101 INDIALANTIC, FL 32903 US

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	PD	Title	DIRECTOR, VP
Name	VOLKERT, LEON H	Name	HENDERSON, CHARISSE A
Address	4747 N. OCEAN DR., #204	Address	122 FOURTH AVE
City-State-Zip:	LAUDERDALE BY THE SEA FL 33308		SUITE 101
		City-State-Zip:	INDIALANTIC FL 32903

FILED Mar 01, 2017 Secretary of State CC7976188634

Date