

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 27, 2003 8:00 am**  
**Secretary of State**

03-27-2003 90082 005 \*\*\*\*61.25

**DOCUMENT # 734015**

1. Entity Name  
**SUMMERTIME HOME OWNERS ASSOCIATION, INC.**



Principal Place of Business

**9436 SW 53RD STREET  
COOPER CITY FL 33328  
US**

Mailing Address

**9436 SW 53 ST.  
COOPER CITY FL 33328  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MONTGOMERY, PHYLLIS  
9436 S.W. 53 STREET  
COOPER CITY FL 33328**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete  
NAME **CURRAN, GEORGE**  
STREET ADDRESS **9489 SW 51ST STREET**  
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **V** ☐ Delete  
NAME **ROTHERMEL, WALTER**  
STREET ADDRESS **9457 SW 52 STREET**  
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☒ Delete  
NAME **GOERICH, FLORENCE**  
STREET ADDRESS **5156 SW 94 AVENUE**  
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE **S** ☒ Change ☐ Addition  
NAME **GREEN, MURIEL**  
STREET ADDRESS **9433 S. W. 51 Street**  
CITY-ST-ZIP **Cooper City FL 33328**

TITLE **T** ☐ Delete  
NAME **ROTHERMEL, SHIRLEY**  
STREET ADDRESS **9457 SW 52 STREET**  
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **ALSFELT, BETTY**  
STREET ADDRESS **9464 SW 51 COURT**  
CITY-ST-ZIP **COOPER CITY FL 33328**

TITLE **D** ☒ Change ☐ Addition  
NAME **DAVIDSON, AUDREY**  
STREET ADDRESS **5040 S. W. 95 Avenue**  
CITY-ST-ZIP **Cooper City, FL 33328**

TITLE **D** ☐ Delete  
NAME **FLICKIGER, ALMA**  
STREET ADDRESS **5030 S.W. 94 TERRACE**  
CITY-ST-ZIP **COOPER CITY FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

*GEORGE T. CURRAN*

SIGNATURE:

*SIGNATURE REQUIRED*

954 434-1540

CR2E037 (10/02)

# Attachment

11. (Cont'd)

D

GASKILL, NANCY  
9452 S. W. 51 Court  
Cooper City, FL 33328

D

GRAEBER, DIANA  
9456 S. W. 51 Court  
Cooper City, FL 33328

D

MONTGOMERY, PHYLLIS  
9436 S. W. 53 Street  
Cooper City, FL 33328

D

SCHLEIBAUM, ELLA  
9461 S. W. 52 Street  
Cooper City, FL 33328

90062646  
734015