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| (Re | equestor's Name |) |
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| (Ac | ldress) | |
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| (Ci | ty/State/Zip/Phor | ne #) |
| PICK-UP | WAIT | MAIL |
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| (Do | ocument Number |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

SUBJECT: THE SUMMIT CONDOMINIUM ASSOCIATION INC
Name of Corporation DOCUMENT NUMBER: 747833 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: STEVE LIPPMAN Name of Contact Person FIRST CHOICE PROPERTY MANAGEMENT GROUP INX 4755 TECHNOLOGY WAY SUITE 202 BOCA RATON FL 33431
City/State and Zip Code SLIPPMAN @ FCPMGINC. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: TENNIFER MITCHELL at (541) 910-7782

Name of Contact Person Area Code & Daytime Telephone Number

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a \$35.00 check made payable to the Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: THE SUMMIT CONDOMINIUM ASSOCIATION INC |
| 2. The principal office address: FIRST CHOICE PROPERTY MANAGEMENT GROUP INC H755 TECHNOLUGY WAY, SUITE DOR, BOCA RATON FL 33431 |
| 3. The mailing address (if different): SAME AS ABOVE |
| 4. Date of incorporation/qualification: 06/27/1979 Document number: 74783\$ 25 |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) |
| MARC HAUSER |
| IIII KANE CONCOURSE, SUITE LIG ? |
| BAY HARBOUR ISLANDS FL 33154 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| FIRST CHOICE PROPERTY MANAGEMENT GROUP INC |
| 4755 TECHNOLOGY WAY, SUITE 202 P.O. BOX NOT acceptable |
| BOCA RATON FL 33431 |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change. |
| Signature of an object to Grander Printed of typed name and title |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to confily with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| Signature of Registered Agent 11/01/11 |
| If signing on behalf of an entity: |
| Typed or Printed Name |
| * * * FILING FEE: \$35.00 * * * |

Make Checks Payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (05)

CR2E045 (8/05)