2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # 757505

FILED

02 OCT 11 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

THE SUMMIT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~701 HELEN STR~~ ~~P.O. BOX 754~~ ~~MOUNT DORA FL 32757-7754~~ ~~US~~	~~701 HELEN STR~~ ~~P.O. BOX 754~~ ~~MOUNT DORA FL 32757-7754~~ ~~US~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
729 Helen St	729 Helen St
~~Suite, Apt. #, etc.~~ PO Box 754	~~Suite, Apt. #, etc.~~ PO Box 754
City & State: Mount Dora FL	City & State: Mount Dora, FL
Zip: 32757 Country: US	Zip: 32757 Country: US

4. FEI Number: 59-2219323 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~BLANL, LOUIS E~~ ~~701 HELEN ST~~ ~~MT. DORA FL 32756~~	Name: Dale George Street Address (P.O. Box Number is Not Acceptable): 729 Helen St. City: Mount Dora FL Zip Code: 32757

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: Dale George 10-8-02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

After September 13, 2002, min. will be $236.25.

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ~~WESSLING, BILL~~ ~~703 HELEN ST~~ ~~MOUNT DORA FL 32757~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCHNEIDER, CAROL 725 HELEN ST MOUNT DORA FL 32757	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP President	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD ARCHANBO, CAROL 725 HELEN ST MOUNT DORA FL 32757	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP 200008403532 10/16/02--01070--021 **236.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD George, Dale 729 Helen St Mount Dora, FL 32757	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (4/02)

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.

SIGNATURE: Dale George ~~SIGNATURE REQUIRED~~ 10-8-02 352-735-1010