2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757505

FILED May 01, 2008 Secretary of State

Entity Name: THE SUMMIT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

729 HELEN STR 729 HELEN STR

P.O. BOX 754 MOUNT DORA, FL 327574877 US

MOUNT DORA, FL 327577754 US

Current Mailing Address: New Mailing Address:

729 HELEN STR 729 HELEN STR

P.O. BOX 754 MOUNT DORA, FL 327574877 US MOUNT DORA, FL 327577754 US

FEI Number: 59-2219323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GEORGE, DALE 729 HELEN ST

MT. DORA, FL 32756 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD () Delete Title: STD (X) Change () Addition Name: WADE, JANET Name: SCHNEIDER, JOHN

Name: WADE, JANET Name: SCHNEIDER, JOHN Address: 715 HELEN ST. Address: 727 HELEN ST.

City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757

Title: VD () Delete Title: () Change () Addition

 Name:
 STINE, LEE
 Name:

 Address:
 705 HELEN ST
 Address:

 City-St-Zip:
 MOUNT DORA, FL 32757
 City-St-Zip:

Title: PD () Delete Title: () Change () Addition

 Name:
 GEORGE, DALE
 Name:

 Address:
 729 HELEN STR
 Address:

 City-St-Zip:
 MOUNT DORA, FL 32757 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DALE GEORGE PD 05/01/2008