

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

pg. 10/2

PROFIT  
CORPORATION  
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 MAY 23 AM 11:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 187671

1. Corporation Name

Summit Properties, Inc.

Principal Place of Business

Mailing Address

9301 N. A-1-A, Ste 4  
Vero Beach, FL 32963

9301 N. A-1-A, Ste 4  
Vero Beach, FL 32963

3. Date Incorporated or Qualified

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

26

59-2610112

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

22

27

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

23

28

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Nawks, Linda  
9301 N. A-1-A, Ste 4  
Vero Beach, FL 32963

81 Name

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

83

84 City

900002192729-9

-05/28/97-01018-011

\*\*\*\*282.50 \*\*\*\*282.50

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

5/20/97

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

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CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

Pres -

address as above

VP -

address as above

900002192729-9

-05/28/97-01018-012

\*\*\*\*282.50 \*\*\*\*282.50

14. I do 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 reported on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas W. Collins / Walter T. McGee

Date

Daytime Phone #

5/20/97 561/589-8000

CR2E034 (9/96)

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## Sanderling Homeowners Assoc.

Telephone 407/589-8000  
Fax 407/589-5100

9301 North A-1-A  
Suite 4  
Vero Beach, Florida 32963

April 30, 1997

Division of Corporations  
Annual Report/Reinstatement Section  
P. O. Box 6327  
Tallahassee, FL 32314-6327

RE: 59-2592950

To Whom It May Concern:

Enclosed please find our fully executed application for reinstatement for Sanderling Property Owners Association, Inc. Unfortunately, we were never advised of the cancellation, nor have we received any forms for this year. We are enclosing our check totaling \$365 to cover the cost for last year's fee and this year's fee.

We noticed a minor mistake in the name and address of the current registered agent, Linda Hawks. Please change the address from 9300 North A-1-A, to 9301 North A-1-A, Suite 4, as noted on the form. Perhaps this is the reason we did not receive the information in a timely manner.

Thank you for your cooperation.

Sincerely,



Thomas H. Collins

THC/lah

spocr

Enclosures