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PROFIT CORPORATION ANNUAL REPORT

1996

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

5-1-96 B-7125-10

DOCUMENT # **L88326** (8)

1. Corporation Name

SUMMIT PARTNERS, INC.

Principal Place of Business	Mailing Address
200 S. HARBOR CITY BLVD. PENTHOUSE FLOOR MELBOURNE FL 32901	200 S. HARBOR CITY BLVD. PENTHOUSE FLOOR MELBOURNE FL 32901

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified: 07/16/1990	3a. Date of Last Report: 05/01/1995
21	26	4. FEI Number: 59-3025835	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

WALDRON, TOM D
200 S HARBOR CITY BLVD
MELBOURNE FL 32901

10. Name and Address of New Registered Agent

81 Name: RICHARD PARKER
82 Street Address (P.O. Box Number is Not Acceptable): 200 S. HARBOR CITY BLVD #301
83
84 City: MELBOURNE FL 85 Zip Code: 32901

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] RICHARD PARKER 4-29-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PARKER, RICHARD		1.2 NAME	
STREET ADDRESS	200 S. HARBOR CITY BLVD		1.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL		1.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	PARKER, RICHARD		2.2 NAME	
STREET ADDRESS	200 S. HARBOR CITY BLVD.		2.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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] 4-29-96 407-724-2333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)