2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # L96179

1. Entity Name
SUMMIT GLOBAL PARTNERS OF FLORIDA, INC.

Principal Place of Business	Mailing Address
1445 ROSS AVENUE 4200 DALLAS, TX 75202 US	1445 ROSS AVENUE 4200 DALLAS, TX 75202 US

01062004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0214784
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	HAYNES, JEFF
STREET ADDRESS	770 S DIXIE HWY
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	SVP
NAME	LEONARD, RICHARD J
STREET ADDRESS	3651 FAU BLVD SUITE 300
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	VP
NAME	BAKER, BRUCE
STREET ADDRESS	3651 FAU BLVD SUITE 300
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	SVP
NAME	MORRIS, GARY H
STREET ADDRESS	3651 FAU BOULEVARD STE 300
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	STEV
NAME	PAN, JEFF C
STREET ADDRESS	1445 ROSS AVE STE 4200
CITY-ST-ZIP	DALLAS, TX 75201
TITLE	SVP
NAME	BOWMAN, STEPHANIE
STREET ADDRESS	1445 ROSS AVE STE 4200
CITY-ST-ZIP	DALLAS, TX 75201

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01/20/04-80045-018 150.00

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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 607, 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: _____ 1-14-04 214 443 3533
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #