2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# N00000003590

Entity Name: SUMMERWIND CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8575 GULF BLVD.
NAVARRE, FL 32566 US

New Principal Place of Business:

Current Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-3682286 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

Name and Address of New Registered Agent:

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:

Title:	DP	( ) Delete
Name:	FELLERS, AL	
Address:	4045 WHISPERING PINES COURT	
City-St-Zip:	SUWANEE, GA 30024 US	
Title:	DP	( ) Delete
Name:	LIGHT, HAL	
Address:	8575 GULF BLVD, SUITE #802	
City-St-Zip:	NAVARRE BEACH, FL 32566 US	
Title:	DS	( ) Delete
Name:	SMITH, KATHRYN	
Address:	201 KENT AVE	
City-St-Zip:	METAIRIE, LA 70001 US	
Title:	DT	( ) Delete
Name:	STEWART, WAYNE	
Address:	2 BOBBY JONES CT	
City-St-Zip:	ROME, GA 30165 US	
Title:	DV	( ) Delete
Name:	BROWN, ROBERT	
Address:	36 PHEASANT DR	
City-St-Zip:	MARIETTA, GA 30067 US	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	RACINE, MARTHA	
Address:	3139 KIRKWOOD PL	
City-St-Zip:	BAY CITY, MI 48706 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	BILBREY, DAVID	
Address:	2265 BRIGGS RD	
City-St-Zip:	CENTERVILLE, OH 45459 US	

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: KATHRYN SMITH S 04/25/2009

Electronic Signature of Signing Officer or Director — Date