

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004124

FILED  
Jan 31, 2007  
Secretary of State

**Entity Name:** SUMMER TOWNE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

16328 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

17644 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32413

**New Mailing Address:**

POST OFFICE BOX 20293  
PANAMA CITY BEACH, FL 32417

**FEI Number:** 59-3702717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEPHENS, LARRY W  
17644 FRONT BEACH RD  
PANAMA CITY BEACH, FL 32413 US

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

STEPHENS, LARRY W  
315 N HIGHWAY 79  
PANAMA CITY BEACH, FL, FL 32413 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:

01/31/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: SLEDGE, KEN  
Address: 17644 FRONT BEACH ROAD  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: TD ( ) Delete  
Name: STEPHENS, LARRY  
Address: 17644 FRONT BEACH ROAD  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: SD ( ) Delete  
Name: STEPHENS, TERESA  
Address: 17644 FRONT BEACH ROAD  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D (X) Delete  
Name: FRY, KEITH  
Address: 16328 FRONT BEACH RD  
City-St-Zip: PANAMA CITY BEACH, FL 32413

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: SLEDGE, KEN  
Address: 101 SEQUOIA DR. SE  
City-St-Zip: ROME, GA 30161

Title: SD (X) Change ( ) Addition  
Name: STEPHENS, TERESA  
Address: 315 N HIGHWAY 79  
City-St-Zip: PANAMA CITY BEACH,, FL 32413

Title: PD (X) Change ( ) Addition  
Name: FRY, KEITH  
Address: 16328 FRONT BEACH RD. #19  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TERESA A. STEPHENS

SD

01/31/2007

Electronic Signature of Signing Officer or Director

Date