

NO00000005990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

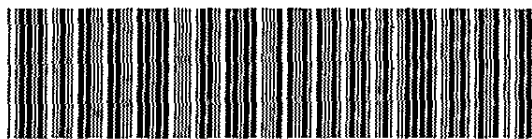
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FILED  
04 MAY 28 PM 4:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2/A Chg  
JPM  
6/2/04

SUMMIT LAKE HOMEOWNERS ASSOCIATION, INC.

C/O C.A.M.S.  
322 N.E. 3<sup>RD</sup> STREET  
BOYNTON BEACH, FL 33435  
(561) 738-0061

May 27, 2004

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

RE: Change of Registered Agent

To Whom It May Concern:

Please note that the correct principal address for the Summit Lake Homeowners Association, Inc. is the address indicated on the letterhead.

We appreciate your assistance in making this correction.

Sincerely,

A handwritten signature in black ink, appearing to read "Les Honeycutt", written in a cursive style.

Les Honeycutt, LCAM  
For the Board of Directors

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SUMMIT LAKE HOMEOWNERS ASSOCIATION, INC.  
(Name of corporation)

**DOCUMENT NUMBER:** N00000005990

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Theresa M. Lemme, Esq.  
(Name of person)

St. John, Core & Lemme, P.A.  
(Name of firm/company)

1601 Forum Place, Suite 701  
(Address)

West Palm Beach, Florida 33401  
(City/state and zip code)

For further information concerning this matter, please call:

Theresa M. Lemme at ( 561 ) 655-8994  
(Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Summit Lake Homeowners Association, Inc.
2. The principal office address: 322 Northeast 3rd Street, Boynton Beach, Florida 33435
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: September 11, 2000 Document number: N00000005990
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Cathie Carr

901 Northpoint Parkway, Suite 108

West Palm Beach, Florida 33407

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

St. John, Core & Lemme, P.A.

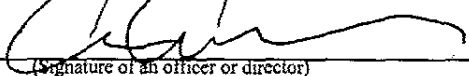
1601 Forum Place, Suite 701

(P.O. Box or personal mailbox NOT acceptable)

West Palm Beach, Florida 33401


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

H.O.A. PRESIDENT SUMMIT LAKE  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

5/20/2004  
(Date)

If signing on behalf of an entity:

David A. Core  
(Typed or Printed Name)

Secretary  
(Capacity)

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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