2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005169

FILED Mar 19, 2009 Secretary of State

Entity Name: SUMMERLIN COMMONS PROPERTY OWNER'S ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** ALLIANT PROPERTY MANAGEMENT 6719 WINKLER ROAD SUITE 200 FORT MYERS, FL 33919 **New Mailing Address: Current Mailing Address:** ALLIANT PROPERTY MANAGEMENT 6719 WINKLER ROAD SUITE 200 FORT MYERS, FL 33919 FEI Number: 65-1133113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLIANT PROPERTY MANAGEMENT ALLIANT PROPERTY MANAGEMENT, LLC 6719 WINKLER ROAD SUITE 200 6719 WINKLER ROAD FORT MYERS, FL 33919 SUITE 200 FORT MYERS, FL 33919 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: JOHN M. STROHM, AGENT 03/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MILLER, TED Name: Name: CREDITCORP PLAZA BANK 25TH FLOOR Address: Address: City-St-Zip: REPUBLIC OF PANAMA, PA City-St-Zip: Title: Title: PD () Delete (X) Change () Addition MILLER, ERIC Name: MILLER, ERIC Name: Address: 1520 ROYAL PALMS SQUARE BLVD # 360 Address: 1520 ROYAL PALM SQUARE BLVD # 360 City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919 Title: () Delete Title: TSD (X) Change () Addition VICTOR, BUZZZ VICTOR, BUZZ Name: Name: 5650 GREENWOOD PLAZA BLVD. #43 5650 GREENWOOD PLAZA BLVD. #43 Address: Address: City-St-Zip: GREENWOOD, CO 80111 City-St-Zip: GREENWOOD VILLAGE, CO 80111 ΑD Title: () Delete Title: ΑD (X) Change () Addition HENDERSON, DEBRA HENDERSON, DEBRA Name: Name: 1520 ROYAL PALMS SQUARE BLVD # 360 1520 ROYAL PALM SQUARE BLVD # 360 Address: Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919

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: ERIC MILLER PD 03/19/2009