


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JUL -6 PM 2:12

DOCUMENT # N02000005762

1. Entry Name
SUMMER OAKS PHASE TWO OF POLK COUNTY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
7433 JESSAMINE DRIVE
LAKELAND, FL 33810 US

Mailing Address
P O BOX 466
KATHLEEN, FL 33849-0466 US

07/02/07 90036 036 \$70.00



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05242007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
APPLIED FOR 51-0574331

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLORES, RAYMOND
7433 JESSAMINE DRIVE
LAKELAND, FL 33810

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD Delete
NAME FLORES, RAYMOND
STREET ADDRESS 7433 JESSAMINE DRIVE
CITY-ST-ZIP LAKELAND, FL 33810

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD Delete
NAME KOWALKOWSKI, CINDY
STREET ADDRESS 7443 LOBLOLLY AVENUE
CITY-ST-ZIP LAKELAND, FL 33810

TITLE SD Change Addition
NAME FLORES, JANET
STREET ADDRESS 7433 JESSAMINE DRIVE
CITY-ST-ZIP LAKELAND, FLORIDA 33810

TITLE TD Delete
NAME GONZALEZ, BRENDA
STREET ADDRESS 7427 LOBLOLLY AVENUE
CITY-ST-ZIP LAKELAND, FL 33810

TITLE TD Change Addition
NAME SANCHEZ, Fidel P.
STREET ADDRESS 7505 JESSAMINE DRIVE
CITY-ST-ZIP LAKELAND, FLORIDA 33810

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Raymond Flores
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNE 25, 2007 863-853-8022
Date Daytime Phone #