2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N02000006191

Entity Name: SUMMERPORT RESIDENTIAL PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W SR 434
STE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 04-3709524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD ( ) Delete
Name: MENSING, JOHN
Address: 4830 INDIAN DEER RD
City-St-Zip: WINDERMERE, FL 34786

Title: VPD ( ) Delete
Name: PROTO, BARBARA
Address: 13845 AMELIA POND DR
City-St-Zip: WINDERMERE, FL 34786

Title: SD ( ) Delete
Name: LOMBARDO, JOHN
Address: 13263 SUNKISS LOOP
City-St-Zip: WINDERMERE, FL 34786

Title: TD ( ) Delete
Name: STAFFORD, DOUG
Address: 14101 ANCILLA BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete
Name: VOSSSCHULTE, NORMAN
Address: 4822 BLUE MAJOR DR
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MENSING, JOHN
Address: 4830 INDIAN DEER RD
City-St-Zip: WINDERMERE, FL 34786

Title: PD (X) Change ( ) Addition
Name: PROTO, BARBARA
Address: 13845 AMELIA POND DR
City-St-Zip: WINDERMERE, FL 34786

Title: VPD (X) Change ( ) Addition
Name: LOMBARDO, JOHN
Address: 13263 SUNKISS LOOP
City-St-Zip: WINDERMERE, FL 34786

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

Title: SD (X) Change ( ) Addition
Name: VOSSSCHULTE, NORMAN
Address: 4822 BLUE MAJOR DR
City-St-Zip: WINDERMERE, FL 34786

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: BARBARA PROTO PD 03/27/2009

Electronic Signature of Signing Officer or Director — Date