2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N02000006464

Entity Name: SUMMER PLACE ESTATES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

108 EGLIN PKWY SE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 4457
FT. WALTON BEACH, FL 32549

New Mailing Address:

FEI Number: 20-1528324 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEROSA, STACIE
1910 KADINA CIRCLE
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

DEROSA, STACIE
1910 KADIMA CIRCLE
FORT WALTON BEACH, FL 32547 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: _____ 01/06/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ANKENY, MARILYN
Address: 1943 KADIMA CIR
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: VP ( ) Delete
Name: WEGNER, RYAN
Address: 1908 KADIMA CIR
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: T ( ) Delete
Name: DEROSA, STACIE
Address: 1910 KADIMA CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: D ( ) Delete
Name: DEROSA, STACIE
Address: 1940 KADIMA CIR
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ANKENEY, MARILYN
Address: 1943 KADIMA CIR
City-St-Zip: FORT WALTON BEACH, FL 32547

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

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

Title: S (X) Change ( ) Addition
Name: DEMERY, DAVID
Address: 1950 KADIMA CIR
City-St-Zip: FORT WALTON BEACH, FL 32547

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: STACIE C DEROSA T 01/06/2009
Electronic Signature of Signing Officer or Director — Date