2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009974

FILED Apr 30, 2004 Secretary of State

Entity Name: TOWNHOMES OF SUMMERFIELD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4902 EISENHOWER BLVD. 10033 9TH ST. N. SUITE 380 2ND FLOOR

TAMPA, FL 33634 ST. PETERSBURG, FL 33716

Current Mailing Address: New Mailing Address:

4902 EISENHOWER BLVD. 10033 9TH ST. N. SUITE 380 2ND FLOOR

TAMPA, FL 33634 ST. PETERSBURG, FL 33716

FEI Number: 11-3679977 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:

RAMPART PROPERTIES, INC.
10033 DR. MARTIN LUTHER KING, JR. STREET N
RAMPART PROPERTIES, INC.
10033 9TH ST. NORTH

ST. PETERSBURG, FL 33716 ÚS 2ND FLOOR

ST. PETERSBURG, FL 33716 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: 04/30/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

Name: VALENTI, BETTY D
Address: 4902 EISENHOWER BLVD., SUITE 380
Name: VALENTI, BETTY D
Address: 10033 9TH ST. N.

City-St-Zip: TAMPA, FL 33634 City-St-Zip: ST. PETERSBURG, FL 33716

Title: VD () Delete Title: VD (X) Change () Addition

Name: APARICIO, NICK Name: HAYDON, THAYER
Address: 4902 EISENHOWER BLVD.. SUITE 380 Address: 10033 9TH ST. N.

City-St-Zip: TAMPA, FL 33634 City-St-Zip: ST. PETERSBURG, FL 33716

Title: STD () Delete Title: TD (X) Change () Addition

 Name:
 THOMPSON, I. CLAY III
 Name:
 THOMPSON, I. CLAY III

 Address:
 311 PARK PLACE BLVD., SUITE 600
 Address:
 10033 9TH ST. N.

City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: ST PETERSBURG, FL 33716

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BETTY VALENTI PD 04/30/2004