

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02410

FILED
Feb 24, 2011
Secretary of State

Entity Name: SUMMERWIND ROADOWNERS MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

344 SUMMERWIND CIR. NORTH
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

SUMMERWIND CR.
PO BOX 742
WOODVILLE, FL 32362

New Mailing Address:

FEI Number: 59-2961589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARNER, MARY
344 SUMMERWIND CIR. NORTH
CRAWFORDVILLE, FL 32327 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: P
Name: GRANGER, RODNEY
Address: 16 SUMMERWIND CIRCLE W.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V
Name: BELTZ, CAROLE
Address: 330 SUMMERWIND CIRCLE N.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S
Name: GARNER, MARY
Address: 344 SUMMERWIND CIRCLE N
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: SOUTHALL, CELYNNA
Address: 81 SUMMERWIND CIRCLE N
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: D
Name: BIRS, ED
Address: 31 BLUEBERRY LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T
Name: CAYA, PAMELA
Address: 128 HUDSON LANE
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby 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 all other like empowered.

SIGNATURE: MARY B. GARNER

S

02/24/2011

Electronic Signature of Signing Officer or Director

Date