

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002633

FILED  
Apr 11, 2009  
Secretary of State

Entity Name: SUMMER LAKES DISTRICT ASSOCIATION, INC.

## Current Principal Place of Business:

7380 MURRELL ROAD SUITE 201  
VIERA, FL 32940

## New Principal Place of Business:

1331 BEDFORD DR.  
SUITE 103  
MELBOURNE, FL 32940

## Current Mailing Address:

7380 MURRELL ROAD SUITE 201  
VIERA, FL 32940

## New Mailing Address:

1331 BEDFORD DR.  
SUITE 103  
MELBOURNE, FL 32940

FEI Number: 06-1687646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DECATOR, JAY A III  
7380 MURRELL ROAD SUITE 201  
VIERA, FL 32940 US

## Name and Address of New Registered Agent:

FAIRWAY MANAGEMENT  
1331 BEDFORD DR.  
SUITE 103  
MELBOURNE, FL 32940 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: THOMAS DILLON

04/11/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DECATOR, JAY A III  
Address: 7380 MURRELL ROAD SUITE 201  
City-St-Zip: VIERA, FL 32940

Title: VSD ( ) Delete  
Name: JOHN, JUDITH C  
Address: 7380 MURRELL ROAD SUITE 201  
City-St-Zip: VIERA, FL 32940

Title: TD ( ) Delete  
Name: MARTELL, PAUL J  
Address: 7380 MURRELL ROAD SUITE 201  
City-St-Zip: VIERA, FL 32940

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HUNTER, DEVON  
Address: 2863 BELLWIND CIR  
City-St-Zip: VIERA, FL 32955

Title: VPD (X) Change ( ) Addition  
Name: ELLINGSON, GREG  
Address: 2912 BELLWIND CIR  
City-St-Zip: VIERA, FL 32955

Title: TD (X) Change ( ) Addition  
Name: JOHNSON, TONY  
Address: 2872 BELLWIND CIR  
City-St-Zip: VIERA, FL 32955

Title: ASD ( ) Change (X) Addition  
Name: MCNAIR, DON  
Address: 3023 BELLWIND CIR  
City-St-Zip: VIERA, FL 32955

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: DEVON HUNTER

PD

04/11/2009

Electronic Signature of Signing Officer or Director

Date