

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003622

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** SUMMER BAY AT INDIAN PASS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

625 E. TENNESSEE ST.  
SUITE 200  
TALLAHASSEE, FL 323084932

**New Principal Place of Business:**

**Current Mailing Address:**

625 E. TENNESSEE ST.  
SUITE 200  
TALLAHASSEE, FL 323084932

**New Mailing Address:**

**FEI Number:** 20-2780378      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WALLACE, NANCY M ESQ.  
106 E COLLEGE AVENUE STE 1200  
TALLAHASSEE, FL 32301 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOOTH, HURLEY H JR  
Address: 625 E. TENNESSEE ST. SUITE 200  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VPD ( ) Delete  
Name: HAMMILL, BRITT  
Address: 625 E. TENNESSEE ST. SUITE 200  
City-St-Zip: TALLAHASSEE, FL 32308

Title: STD ( ) Delete  
Name: MORRIS, GEORGE  
Address: 625 E. TENNESSEE ST. SUITE 200  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: HURLEY BOOTH

PD

05/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date