2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006017

FILED Apr 10, 2008 Secretary of State

Entity Name: SUMMERBROOK HOMEONWERS ASSOCIATION, INC.

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

3620 PEORIA RD 4213 COUNTY ROAD 218

ORANGE PARK, FL 32065 1 MIDDLEBURG, FL 32068

Current Mailing Address: New Mailing Address:

3620 PEORIA RD 4213 COUNTY ROAD 218 ORANGE PARK, FL 32065 1

MIDDLEBURG, FL 32068

FEI Number: 20-3536896 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:

MOSS, JOHN B

1530 BUSINESS CENTER DR., STE 4

ODANICE DADIC FL. 22002 J.S.

4213 COUNTY ROAD 218

ORANGE PARK, FL 32003 ÚS 1
MIDDLEBURG, FL 32068 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: VINA DELCOMYN 04/10/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PD (X) Change () Addition Name: WRIGHT, L. JOHN SR. Name: THIBAULT, RONALD

Address: 3620 PEORIA RD Address: 1107 SUMMER SPRINGS DRIVE
City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: MIDDLEBURG, FL 32068

Title: D () Delete Title: VP/T (X) Change () Addition

Name: SMITH, CHRISTINE Name: O'DELL, RYAN
Address: 3620 PEORIA RD Address: 1368 SUMMERBROOK DRIVE

Address: 3620 PEORIA RD Address: 1368 SUMMERBROOK DRIVE City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip: MIDDLEBURG, FL 32068

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

Name:MOSS, JOHN BName:THOMAS, VICKIEAddress:1530 BUSINESS CENTER DR STE 4Address:1114 SUMMER SPRINGS DRIVE

Address: 1330 BOSINESS CEINTER DR STE 4 Address: 1114 SOMMER SPRINGS DRIVE
City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: MIDDLEBURG, FL 32068

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

 Name:
 Name:
 FULGENCIO, JASON

 Address:
 Address:
 1111 SUMMER SPRINGS DRIVE

City-St-Zip: City-St-Zip: MIDDLEBURG, FL 32068

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: RONALD THIBAULT PD 04/10/2008

Electronic Signature of Signing Officer or Director

Date