2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# N07000011723

Entity Name: SUMMERLAND KEY COVE AMD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

411 AIRPORT DRIVE NORTH
SUMMERLAND KEY, FL 33042

New Principal Place of Business:

Current Mailing Address:

411 AIRPORT DRIVE NORTH
SUMMERLAND KEY, FL 33042

New Mailing Address:

FEI Number: 26-3600569 **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:

EIDSCHUN, CHARLES D
2899 HERON PLACE
CLEARWATER, FL 33762 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: DP ( ) Delete
Name: MERRILL, KARL
Address: 411 AIRPORT DRIVE NORTH
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: DT ( ) Delete
Name: MARZELLA, JAY
Address: 155 AIRPORT DRIVE NORTH
City-St-Zip: SUMMERLAND KEY, FL 33042

Title: DS ( ) Delete
Name: EIDSCHUN, CHARLES D
Address: 2899 HERON PLACE
City-St-Zip: CLEARWATER, FL 33762

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: CHARLES D. EIDSCHUN DS 05/11/2009

Electronic Signature of Signing Officer or Director — Date