2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12383

FILED Apr 24, 2008 Secretary of State

Entity Name: THE SUMMERHOUSE HOMEOWNERS' ASSOCIATION, INC.

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

2000 SCENIC GULF DRIVE DESTIN, FL 32541 US

Current Mailing Address: New Mailing Address:

P.O. BOX 5036

NICEVILLE, FL 32578 US

FEI Number: 59-2751497 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:

DONALDSON, PATRICIA DONALDSON, PATRICIA 4400 HIGHWAY 20 EAST 1571 HICKORY STREET SUITE 113 NICEVILLE, FL 32578 NICEVILLE, FL 32578 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: PATRICIA DONALDSON 04/24/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD (X) Change () Addition () Delete HANSEN, BEVERLY HANSEN, BEVERLY Name: Name: 1001 BAYSHORE DRIVE Address: 2000 SCENIC GULF DRIVE SH#5 Address:

City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: DESTIN, FL 32550

Title: PD () Delete Title: (X) Change () Addition SADOWSKI, DEAN L Name: WEHE, LAURA Name:

Address: PO BOX 6113 Address: 2000 SCENIC GULF DRIVE SH#7 City-St-Zip: DESTIN, FL 32550

DESTIN, FL 32550 City-St-Zip:

Title: TD () Delete Title: STD (X) Change () Addition HANSEN, JERRY HANSEN, JERRY Name: Name:

2000 SCENIC GULF DRIVE SH#5 1001 BAYSHORE DRIVE Address: Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: DESTIN, FL 32550

() Change () Addition

() Delete Title: Title: ASH, JODY Name: Name: 1930 S. 19TH STREET Address: Address: City-St-Zip: TERRE HAUTE, IN 47802 City-St-Zip:

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

CORDEIRO, JAMES CORDEIRO, JAMES Name: Name:

2000 SCENIC GULF DRIVE #8 2000 SCENIC GULF DRIVE #8 Address: Address:

DESTIN, FL 32550 City-St-Zip: DESTIN, FL 32550 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: JERRY HANSEN STD 04/24/2008

Electronic Signature of Signing Officer or Director

Date