

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 20, 2012
Secretary of State

DOCUMENT# N15921

Entity Name: SUMMIT TRAIL HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1001 SUMMIT TRAIL CIRCLE
WEST PALM BEACH, FL 33415 US**New Principal Place of Business:****Current Mailing Address:**3900 WOODLAKE BLVD.
SUITE 309
LAKE WORTH, FL 33463 US**New Mailing Address:****FEI Number:** 65-0014586**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**POSNER, MICHAEL J ESQ.
4420 BEACON CIRCLE SUITE 100
WEST PALM BEACH, FL 33407 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: PD
Name: SCHOTT, FRED MR.
Address: 3900 WOODLAKE BLVD SUITE 309
City-St-Zip: LAKE WORTH, FL 33463

Title: D
Name: LIDDLE, BROOK
Address: C/O 3900 WOODLAKE BLVD SUITE 309
City-St-Zip: LAKE WORTH, FL 33463

Title: TD
Name: BAIN, HAYDEN MR.
Address: 3900 WOODLAKE BLVD SUITE 309
City-St-Zip: LAKE WORTH, FL 33463

Title: SD
Name: MALACKO, JEAN MS.
Address: 3900 WOODLAKE BLVD SUITE 309
City-St-Zip: LAKE WORTH, FL 33463

Title: D
Name: FERNANDEZ, IVANIA
Address: C/O 3900 WOODLAKE BLVD SUITE 309
City-St-Zip: LAKE WORTH, FL 33463

I hereby 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 all other like empowered.

SIGNATURE: FRED SCHOTT

PD

08/20/2012

Electronic Signature of Signing Officer or Director

Date