2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 13, 2006 8:00 am Secretary of State DOCUMENT # N21970 1. Entity Name 02-13-2006 90022 018 ****61.25 SUMMERLIN VILLAGE CONDOMINIUM ASSOCIATION. INC. Principal Place of Business Mailing Address 8210 SUMMERLIN VILLAGE CIRCLE 8210 SUMMERLIN VILLAGE CIRCLE FT MYERS FL 33919 FT MYERS FL 33919 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 65-0032847 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 8/160 SUMMERLIN VILLALE STAVANS, PETE 8150 SUMMERLIN VILLAGE CIRCLE A03 UMT 503 FT, MYERS FL 33919 Zip Code MYENS 33919 8. 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. I am familiar with, and accept FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD Delete TITLE Addition TITLE Change BENNETT, JODE 8901 WOODGATE, MANOR COURT NAME SANDERS, LEE NAME STREET ADDRESS 8140 SUMMERLIN VILLAGE CIR. APT 304 STREET ADDRESS FORT MYERS FL 33919 FT MYERS, FL 33908 CITY-ST-ZIP CITY-ST-ZIP Delete Change Áddition TITLE TITLE EFORMAS SHECHT, LEDNARD CINCLES# 503 METCALF, WILLIAM NAME NAME 8160 SUMMERLIN VILLAGE CIRCLE, 508 STREET ADDRESS STREET ADDRESS FT MYERS FL 33919 CITY-ST-ZIP FT MYERS, FL 33919 CITY-ST-ZIF Delete TITLE SD TITLE NANNI, PETE NAME WELCH, KAREN NAME 8160 SUMMERLIN VILLAGE CIRCLE #505 STREET ADDRESS 8170 SUMMERLIN VILLAGE CIRLE #601 STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33919 CITY-ST-ZIP FT MYERS, FL 33919 TD Delete TITLE ☐ Change Addition TITLE CARR, DAVID G NAME NAME STREET ADDRESS 8140 SUMMERLIN VILLAGE CIRCLE, 308 STREET ADDRESS FT MYERS FL 33919 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change 1. Addition NANNI, PETE 8160 SYMMERLIN VILLAGE CIRCLE # 505 STAVRUS, PETE NAME NAME 8150 SUMMERLIN VILLAGE CIRCLE, 403 STREET ADDRESS STREET ADDRESS FT. MYERS FL 33919 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

FILED

SIGNATURE: DOWN TO TAKE (230) 481-6477

if changed, or on an attachment with an address, with all other like empowered.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11