

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25835

FILED
Mar 31, 2010
Secretary of State

Entity Name: SUMMERFIELD ASSOCIATION, INC.

Current Principal Place of Business:

100 CHELMSFORD PLACE
PONTE VEDRA BEACH, FL 32082 US

New Principal Place of Business:

100 CHELMSFORD PL
PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address:

PO BOX 2702
PONTE VEDRA BEACH, FL 32004 US

New Mailing Address:

FEI Number: 59-2912368 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAY, JONATHAN L
100 CHELMSFORD PLACE
PONTE VEDRA BEACH, FL 32082 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: KEATING, CRAIG
Address: 132 SUMMERFIELD DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: TD
Name: BROWN, LYNN M
Address: 105 GLENMAWR CT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: ANDERSON, LINDA
Address: 149 SUMMERFIELD DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: ARIAV, JEANNE
Address: 104 SPRINGMOOR LN
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: SMITH, HARRY
Address: 101 MEADOWCREST DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD
Name: KEATING, CRAIG
Address: 132 SUMMERFIELD DR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: LYNN BROWN

TD

03/31/2010

Electronic Signature of Signing Officer or Director

_____ Date