

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 20, 2009
Secretary of State

DOCUMENT# N27619

Entity Name: SUMMERLIN TRACE CONDOMINIUM NO. 7 ASSOCIATION, INC.**Current Principal Place of Business:**BCH MANAGEMENT GROUP
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907 US**New Principal Place of Business:**BCH GROUP MANAGEMENT, INC
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907 US**Current Mailing Address:**BCH MANAGEMENT GROUP
1840 BOY SCOUT DRIVE, SUITE B
FORT MYERS, FL 33907 US**New Mailing Address:**1840 BOY SCOUT DRIVE
SUITE B
FORT MYERS, FL 33907 US**FEI Number:** 65-0428727**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOORE, DIANA L
1840 BAY SCOUT DR STE B
FORT MYERS, FL 33907 US**Name and Address of New Registered Agent:**MOORE, DIANA L
1840 BOY SCOUT DR STE B
FORT MYERS, FL 33907 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: DIANA L. MOORE

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COMBS, JEFFREY
Address: 14501 LAKEWOOD TRACE CT, # 104
City-St-Zip: FT. MYERS, FL 33919

Title: TD () Delete
Name: JOHNSON, SANDY
Address: 14501 LAKEWOOD TRACE CT, # 101
City-St-Zip: FORT MYERS, FL 33919

Title: SD () Delete
Name: YERIAN, JULIE
Address: 14501 LAKEWOOD TRACE CT, # 103
City-St-Zip: FORT MYERS, FL 33919

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: JEFFERY COMBS

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date