

FILE NOW: FILING FEE IS \$61.25

FILED
May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthart Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N32139 (0)

1. Corporation Name
SUMMER CHASE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 8335 LAKE CYPRESS RD. LAKE WORTH FL 33467	Mailing Address 8335 LAKE CYPRESS RD. LAKE WORTH FL 33467
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3. Date Incorporated or Qualified
05/05/1989

4. FEI Number
65-0140824

Applied For	Not Applicable
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2. Principal Place of Business 21 C/O CMD MGMT INC	2a. Mailing Address 26 C/O CMD MGMT INC
Suite, Apt. #, etc. 22 3082 JOK ROAD	Suite, Apt. #, etc. 27 3082 JOK ROAD
City & State 23 LAKE WORTH, FL	City & State 28 LAKE WORTH, FL
Zip 24 33467	Country 25 U.S
Country 29 U.S	Zip 30 33467

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

**ST. JOHN, KING & DICKER
500 AUSTRALIAN AVE., SOUTH
SUITE 600
WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81 Name DAVID ROSENTHAL	
82 Street Address (P.O. Box Number is Not Acceptable) CMD MANAGEMENT INC.	
83 3082 JOK ROAD	
84 City LAKE WORTH	85 Zip Code FL 33467

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *David C. Morthart* (Signature, typed or printed name of registered agent and title if applicable.) *Agnt for Assoc 4/29/98* (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS	
TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME BLOOM, ROY J	
STREET ADDRESS 3981 SUMMER SHASE COURT	
CITY-ST-ZIP LAKE WORTH FL	
TITLE VD	<input checked="" type="checkbox"/> DELETE
NAME SIRULL, LEO	
STREET ADDRESS 3997 SUMMER CHASE COURT	
CITY-ST-ZIP LAKE WORTH FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME D'ADDARIO, MERLE	
STREET ADDRESS 1690 S CONGRESS AVE	
CITY-ST-ZIP DELRAY FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME D FLOYD MARKOWITZ	<input checked="" type="checkbox"/> ADDITION
STREET ADDRESS 9510 GOLDEN CYPRESS COURT	
CITY-ST-ZIP LAKE WORTH, FL 33467	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME HAROLD FLANAGAN	
1.3 STREET ADDRESS 3780 COUNTRY VISTA WAY	
1.4 CITY-ST-ZIP LAKE WORTH, FL 33467	
2.1 TITLE VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME BARBARA GORDON	
2.3 STREET ADDRESS 8531 GOLDEN CYPRESS COURT	
2.4 CITY-ST-ZIP LAKE WORTH, FL 33467	
3.1 TITLE TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME AL STEINHART	
3.3 STREET ADDRESS 8520 LAKE CYPRESS ROAD	
3.4 CITY-ST-ZIP LAKE WORTH, FL 33467	
4.1 TITLE SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME MARIE LEONARD	
4.3 STREET ADDRESS 8360 WINTER SPRINGS LANE	
4.4 CITY-ST-ZIP LAKE WORTH, FL 33467	
5.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME SUE AKSELROD	
5.3 STREET ADDRESS 3847 SUMMER CHASE COURT	
5.4 CITY-ST-ZIP LAKE WORTH, FL 33467	
6.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME BERNARD SOLOMON	
6.3 STREET ADDRESS 3713 SPRING CREST COURT	
6.4 CITY-ST-ZIP LAKE WORTH, FL 33467	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *David C. Morthart* **3/31/98**

CR2E037 (10/97)