

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90134 010 ****61.25

0066047

DOCUMENT # N32139

1. Entity Name

SUMMER CHASE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

23283 S CONGRESS AVE
 2-A
 WEST PALM BEACH FL 33406
 US

Mailing Address

23283 S CONGRESS AVE
 2-A
 WEST PALM BEACH FL 33406
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0140824

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GELFORD AND ARPE PA
ONE CLEAR LAKE CENTER
2503 AUSTRALIAN AVE STE 1010
WEST PALM BEACH FL 33401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITILE Delete
 NAME **STEINHART, AL**
 STREET ADDRESS **8520 LAKE CYPRESS RD**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITILE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

P Delete
 NAME **SADOW, JACK**
 STREET ADDRESS **3747 SPRING CREST CT**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

D Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D Delete
 NAME **WEISS, ERWIN**
 STREET ADDRESS **3841 SUMMER-CHASE CT**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D Delete
 NAME **MURRAY, LEONARD**
 STREET ADDRESS **8360 WINTER SPRINGS LAKE**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

~~D~~ Change Addition
 NAME **SOMERAN**
 STREET ADDRESS **3923 SUMMER CHASE CT.**
 CITY-ST-ZIP **LAKE WORTH, FL 33467**

DVD Delete
 NAME **BANK, GERALD**
 STREET ADDRESS **3770 COUNTRY VISTA WAY**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

DAT Delete
 NAME **GROSS, MELVIN**
 STREET ADDRESS **8401 CYPRESS GLEN CT**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

SIGNATURE:

AL STEINHART
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)