


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90185 006 ****61.25

DOCUMENT # N32139

1. Entity Name
SUMMER CHASE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address


2328 S CONGRESS AVE **2328 S CONGRESS AVE**
2-A **2-A**
WEST PALM BEACH FL 33406 **WEST PALM BEACH FL 33406**
US **US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0140824** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BECKER & POLIAKOFF, P.A.
ATTN: PETER C. MOLLENGARDEN, ESQ.
500 AUSTRALIAN AVE. SOUTH, 9TH FLOOR
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> Delete
NAME	STEINHART, AL	
STREET ADDRESS	8520 LAKE CYPRESS RD	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	SADOW, JACK	
STREET ADDRESS	3747 SPRING CREST CT	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEISS, ERWIN	
STREET ADDRESS	3841 SUMMER-CHASE CT	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SONRRAN, J	
STREET ADDRESS	3933 SUMMER CHASE CT	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	BANK, GERALD	
STREET ADDRESS	3770 COUNTRY VISTA WAY	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	DAT	<input type="checkbox"/> Delete
NAME	GROSS, MELVIN	
STREET ADDRESS	8401 CYPRESS GLEN CT	
CITY-ST-ZIP	LAKE WORTH FL 33467	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SANTAC BUA, GRACE	
STREET ADDRESS	3868 SUMMER CHASE CT	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	PROS.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SADOW, JACK	
STREET ADDRESS	3747 SPRING CREST CT	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SOMERDIN, JERRY	
STREET ADDRESS	3933 SUMMER CHASE CT	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BANK, GERALD	
STREET ADDRESS	3770 COUNTRY VISTA WAY	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 433-19370

CR2E037 (10/02)