2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2009
Secretary of State

DOCUMENT# N35844

Entity Name: SUMMER CREEK-PHASE II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4257 NW 64TH ST
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

4257 NW 64TH ST
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-3168542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LATORRE, DONA
4416 NW 60 TERR
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

STONE, CRAIG
5918 NW 44TH PLACE
GAINESVILLE, FL 32606 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: CRAIG STONE 09/03/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HODGE, WARREN
Address: 6428 NW 42 LANE
City-St-Zip: GAINESVILLE, FL 32606

Title: SD ( ) Delete
Name: RYON, DARLENE
Address: 4121 NW 59 TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: TD ( ) Delete
Name: LATORRE, DONA
Address: 4416 NW 60 TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: VD ( ) Delete
Name: RYON, DAN
Address: 4121 NW 59 TERR
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RYON, DAN
Address: 4121 NW 59TH TERR.
City-St-Zip: GAINESVILLE, FL 32606

Title: SD (X) Change ( ) Addition
Name: LUCAS, DAN
Address: 4102 NW 59 TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: TD (X) Change ( ) Addition
Name: STONE, CRAIG
Address: 5918 NW 44TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: VD (X) Change ( ) Addition
Name: SHINN, JON
Address: 5915 NW 43RD LANE
City-St-Zip: GAINESVILLE, FL 32606

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: CRAIG STONE TD 09/03/2009
Electronic Signature of Signing Officer or Director Date