

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39043

FILED  
Jan 16, 2009  
Secretary of State

**Entity Name:** SUMMERLIN TRACE CONDOMINIUM NO. 11 ASSOCIATION, INC.

**Current Principal Place of Business:**

BCH MGMT GROUP INC  
1840 BOY SCOUT DR STE B  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

BCH MGMT GROUP INC  
1840 BOY SCOUT DR STE B  
FORT MYERS, FL 33907 US

**New Mailing Address:**

**FEI Number:** 65-0248902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BCH MGMT GROUP INC  
1840 BOY SCOUT DR STE B  
FORT MYERS, FL 33907 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D (X) Delete  
Name: HICKE, RICHARD  
Address: 14455 CYPRESS TRACE COURT  
City-St-Zip: FT MYERS, FL 33919

Title: STD ( ) Delete  
Name: ROEMER, CHRISTOPHER  
Address: 14457 LAKEWOOD TRACE CT  
City-St-Zip: FORT MYERS, FL 33919

Title: ST ( ) Delete  
Name: NADEAY, THERESA  
Address: 14470 LAKEWOOD TRACE CT 206  
City-St-Zip: FORT MYERS, FL 33919

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: ROEMER, CHRISTOPHER  
Address: 14457 LAKEWOOD TRACE CT  
City-St-Zip: FORT MYERS, FL 33919

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: DIANA MOORE

AGT

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date