

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50748

FILED
Apr 22, 2009
Secretary of State

Entity Name: SUMMERFIELD COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

6542 SE TWIN OAKS CIRCLE
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

% PRIME MANAGEMENT GROUP
2074 W. INDIANTOWN ROAD, SUITE 200
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 65-0364404 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROSS EARLE & BONAN, P.A.
759 SOUTH FEDERAL HIGHWAY
SUITE 212
STUART, FL 34994 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 () Delete
Name: STEVENS, TOM
Address: 6605 SE BROADMORE LN
City-St-Zip: STUART, FL 34997

Title: S () Delete
Name: CRAWFORD, SAND
Address: 6944 SE TWIN OAKS CIR
City-St-Zip: STUART, FL 34997

Title: P () Delete
Name: ROTONDO, VINCENT
Address: 7079 SE SLEEPY HOLLOW LANE
City-St-Zip: STUART, FL 34997

Title: VP () Delete
Name: MOKOWSKA, KEITH
Address: 6564 SE BROADMOOR LANE
City-St-Zip: STUART, FL 34997

Title: TD () Delete
Name: BROWN, PAMELA
Address: 3785 SE WARWICK LANE
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: BLANCHETTE, RICHARD
Address: 3130 SE INDIANWEIS PLACE
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STEVENS, TOM
Address: 6605 SE BROADMOOR LN
City-St-Zip: STUART, FL 34997

Title: SD (X) Change () Addition
Name: CRAWFORD, SANDRA
Address: 6944 SE TWIN OAKS CIR
City-St-Zip: STUART, FL 34997

Title: TD (X) Change () Addition
Name: DECKER, LEWIS
Address: 6679 SE TWIN OAKS CIRCLE
City-St-Zip: STUART, FL 34997

Title: D (X) Change () Addition
Name: MERKLIN, DAVID
Address: 3154 SE BRIERWOOD PLACE
City-St-Zip: STUART, FL 34997

Title: D (X) Change () Addition
Name: MAGNUSON, PAUL
Address: 7114 BAY HILL DRIVE
City-St-Zip: STUART, FL 34997

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: GEORGE E. URGO

MGR

04/22/2009

Electronic Signature of Signing Officer or Director

Date