

N93000004264

(Requestor's Name)

(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 DEC 13 PM 4:33

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Amend

DEC 13 2016

I ALBRITTON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** SummerWinds Owners Association, Inc. \_\_\_\_\_

**DOCUMENT NUMBER:** N93000004264 \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul R. Hansen

\_\_\_\_\_  
(Name of Contact Person)

SummerWinds Owners Association

\_\_\_\_\_  
(Firm/ Company)

6323 Thomas Drive

\_\_\_\_\_  
(Address)

Panama City Beach, Florida 32408

\_\_\_\_\_  
(City/ State and Zip Code)

phansen22@msn.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul R. Hansen

847.565.3907

at

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 2, 2016

PAUL R. HANSEN  
SUMMERWINDS OWNERS ASSOCIATION, INC.  
6323 THOMAS DRIVE  
PANAMA CITY BEACH, FL 32408

SUBJECT: SUMMERWINDS OWNERS ASSOCIATION, INC.  
Ref. Number: N93000004264

We have received your document for SUMMERWINDS OWNERS ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 016A00025692

Articles of Amendment  
to  
Articles of Incorporation  
of

SummerWinds Owners Association, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N93000004264

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new*

*name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

*(Principal office address **MUST BE A STREET ADDRESS**)*

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)          | <u>Title</u> | <u>Name</u>                  | <u>Address</u>                     |
|---|--------------|------------------------------|------------------------------------|
| 1) <input type="checkbox"/> Change            | <u>S/T</u>   | <u>William E. Masker, Jr</u> | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add                  |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input checked="" type="checkbox"/> Remove    |              |                              | <u></u>                            |
| 2) <input type="checkbox"/> Change            | <u>V/T</u>   | <u>Reinhard Hanselka</u>     | <u>6323 Thomas Drive</u>           |
| <input checked="" type="checkbox"/> Add       |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input type="checkbox"/> Remove               |              |                              | <u></u>                            |
| 3) <input checked="" type="checkbox"/> Change | <u>D</u>     | <u>Daniel L. Post</u>        | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add                  |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input type="checkbox"/> Remove               |              |                              | <u></u>                            |
| 4) <input checked="" type="checkbox"/> Change | <u>D</u>     | <u>George C. Trussell</u>    | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add                  |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input type="checkbox"/> Remove               |              |                              | <u></u>                            |
| 5) <input type="checkbox"/> Change            | <u>D</u>     | <u>Shirley Guas</u>          | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add                  |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input checked="" type="checkbox"/> Remove    |              |                              | <u></u>                            |
| 6) <input type="checkbox"/> Change            | <u>D</u>     | <u>L. Vann Hippler</u>       | <u>6323 Thomas Drive</u>           |
| <input checked="" type="checkbox"/> Add       |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input type="checkbox"/> Remove               |              |                              | <u></u>                            |

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)       | <u>Title</u> | <u>Name</u>                  | <u>Address</u>                     |
|--|--------------|------------------------------|------------------------------------|
| 1) <input type="checkbox"/> Change         | <u>D</u>     | <u>Edward M. Tracy</u>       | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add               |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input checked="" type="checkbox"/> Remove |              |                              | <u></u>                            |
| 2) <input type="checkbox"/> Change         | <u>D</u>     | <u>William J. Cunningham</u> | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add               |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input checked="" type="checkbox"/> Remove |              |                              | <u></u>                            |
| 3) <input type="checkbox"/> Change         | <u>S</u>     | <u>Jean Ann Retherford</u>   | <u>6323 Thomas Drive</u>           |
| <input type="checkbox"/> Add               |              |                              | <u>Panama City Beach, FL 32408</u> |
| <input type="checkbox"/> Remove            |              |                              | <u></u>                            |
| 4) <input type="checkbox"/> Change         | <u></u>      | <u></u>                      | <u></u>                            |
| <input type="checkbox"/> Add               |              |                              | <u></u>                            |
| <input type="checkbox"/> Remove            |              |                              | <u></u>                            |
| 5) <input type="checkbox"/> Change         | <u></u>      | <u></u>                      | <u></u>                            |
| <input type="checkbox"/> Add               |              |                              | <u></u>                            |
| <input type="checkbox"/> Remove            |              |                              | <u></u>                            |
| 6) <input type="checkbox"/> Change         | <u></u>      | <u></u>                      | <u></u>                            |
| <input type="checkbox"/> Add               |              |                              | <u></u>                            |
| <input type="checkbox"/> Remove            |              |                              | <u></u>                            |

[illegible]

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

November 28, 2016  
Dated \_\_\_\_\_

Signature: Reinhard Hanselka

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Reinhard Hanselka

\_\_\_\_\_  
(Typed or printed name of person signing)

Vice President

\_\_\_\_\_  
(Title of person signing)