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Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N93000005185 (4)**

1. Corporation Name

SUMMER LAKES EAST HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**700 N.W. 107 AVE.
MIAMI FL 33172**

**700 N.W. 107 AVE.
MIAMI FL 33172**

2. Principal Place of Business

2a. Mailing Address

21 4131 Gunn Hwy

26 Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Tampa, FL

28

Zip

Country

Zip

Country

24 33624

25 USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GREENACRE PROPERTIES INC
4131 GUNN HWY
TAMPA FL 33624**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☐ DELETE
NAME **SECORD, KEITH**
STREET ADDRESS **4902 EISENHOWER BLVD STE 100**
CITY-ST-ZIP **TAMPA FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **PD** ☐ DELETE
NAME **HUDRICK, DEBORA L.**
STREET ADDRESS **4902 EISENHOWER BLVD #100**
CITY-ST-ZIP **TAMPA FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **HUDRICK, DEBORA L.**
2.3 STREET ADDRESS **to correct spelling**
2.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE
NAME **CHRONIS, TED**
STREET ADDRESS **4902 EISENHOWER BLVD STE 100**
CITY-ST-ZIP **TAMPA FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **Secretary/Treasurer**
3.3 STREET ADDRESS **William Cahill**
3.4 CITY-ST-ZIP **4902 Eisenhower Blvd #100**
Tampa, FL 33634

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Debora L. Hudrick** 1/19/98 813-882-4663

CP2E037 (10/97)