

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90186 033 ****61.25

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1. Entity Name

SUMMER WIND ASSOCIATION, INC.



Principal Place of Business

J+L PROPERTY MGMT, INC
10191 W SAMPLE RD
CORAL SPRINGS FL 33065

Mailing Address

J+L PROPERTY MGMT, INC
10191 W SAMPLE RD
CORAL SPRINGS FL 33065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0574799

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CALDERAZZO, JAMES
10191 W SAMPLE RD
CORAL SPRINGS FL 33065

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE VP/D ☒ Delete
NAME COHEN, JOEL
STREET ADDRESS 520 NW 115TH WAY
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ Delete
NAME WARREN, PAMELA
STREET ADDRESS 445 NW 115TH WAY
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ Delete
NAME GARNER, PHIL
STREET ADDRESS 11536 NW 5TH ST
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME BRATHEN, THORBJORN
STREET ADDRESS 11544 NW 6TH PL
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☒ Addition
NAME BERKOWITZ, ROBERT
STREET ADDRESS 11576 NW 5TH ST
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☒ Addition
NAME MAINGOT, DAVID
STREET ADDRESS 560 NW 115TH WAY
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ Change ☒ Addition
NAME GLEASON, JAMES
STREET ADDRESS 11511 NW 4TH AVE
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☒ Addition
NAME ALVAREZ, JOSE
STREET ADDRESS 11522 NW 4TH AVE
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pamela Conner (Pres)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #