

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# N94000000619

Entity Name: SUMMER WIND ASSOCIATION, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

J&L PROPERTY MGMT, INC
10191 W SAMPLE RD SUITE 203
CORAL SPRINGS, FL 33065

Current Mailing Address:

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

New Mailing Address:

J&L PROPERTY MGMT, INC
10191 W SAMPLE RD SUITE 203
CORAL SPRINGS, FL 33065

FEI Number: 65-0574799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDERAZZO, JAMES
10191 W SAMPLE RD
CORAL SPRINGS, FL 33065 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: T () Delete
Name: MAGEE, DAVID
Address: 480 NW 115 WAY
City-St-Zip: POMPANO BEACH, FL 33071

Title: P () Delete
Name: DAVIS, MICHAEL
Address: 11563 NW 6 CT
City-St-Zip: POMPANO BEACH, FL 33071

Title: VP () Delete
Name: LINARES, LPONOR
Address: 11586 NW 5 ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S () Delete
Name: SINBERG, JOY
Address: 302 NW 115 WAY
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JAMES CALDERAZZO

RA

01/15/2009

Electronic Signature of Signing Officer or Director

_____ Date