2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003923

FILED Apr 06, 2012 Secretary of State

Entity Name: THE OAKS OF SUMMIT LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

482 BREEZEWAY DRIVE 107 N. LINE DR

APOPKA, FL 32712 US APOPKA, FL 32703 US

Current Mailing Address: New Mailing Address:

P.O. BOX 2314 107 N. LINE DR

APOPKA, FL 327042314 APOPKA, FL 32703 US

FEI Number: 59-3312229 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ATKINS, ALISON H

482 BREEZEWAY DRIVE

APOPKA, FL 32712 US

SUTHERLAND, THERESA D

107 N. LINE DR.

APOPKA, FL 32703 US

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: THERESA D SUTHERLAND 04/06/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: I

Name: ATKINS, ALISON H Address: 107 N. LINE DR. City-St-Zip: APOPKA, FL 32703 US

Title: VPD

Name: BARTELL, TIM
Address: 107 N. LINE DR.
City-St-Zip: APOPKA, FL 32703 US

Title: SD

Name: BARTELL, MARLO
Address: 107 N. LINE DR.
City-St-Zip: APOPKA, FL 32703 US

Title: TD

 Name:
 TOWERY, PATTY

 Address:
 107 N. LINE DR.

 City-St-Zip:
 APOPKA, FL 32703 US

I hereby 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 all other like empowered.

SIGNATURE: ALISON ATKINS PD 04/06/2012