

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 8:00 am
Secretary of State

01-10-2006 90031 010 ****61.25

DOCUMENT # N98000001502 1. Entity Name SUMMERLIN CONDOMINIUM OWNERS ASSOCIATION, INC.																																																																																															
Principal Place of Business 774 SUNDIAL CT FORT WALTON BEACH, FL 32548				Mailing Address 43 MIRACLE STRIP PKWY SW FORT WALTON BEACH, FL 32548																																																																																											
2. Principal Place of Business		3. Mailing Address																																																																																													
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																													
City & State		City & State																																																																																													
Zip	Country	Zip	Country																																																																																												
6. Name and Address of Current Registered Agent SHOREY, RON 43 MIRACLE STRIP PKWY SW FORT WALTON BEACH, FL 32548				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																											
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																															
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																											
Make check payable to Florida Department of State																																																																																															
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>VD BROWN, SIDNEY K JR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>1233 NAVAHO TR RICHARDSON, TX 75080</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>P LOUCKS, PAT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>2241 SALIENT RD MARIETTA, GA 30064</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>D BENDOCK, SCOTT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>723 FIRST COTTON DR POWDER SPRINGS, GA 30127</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>D VASSEUR, CALVIN</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>29724 MARK BLVD MADISON HEIGHTS, MI 48071</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>DT SWEENEY, ROBERT</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>128 W 34TH ST LATONIA, KY 41015</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 45%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>VP 1417 Rumstill Creek Circle</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Niceville, FL 32578</td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>NAME</td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	VD BROWN, SIDNEY K JR		CITY-ST-ZIP	1233 NAVAHO TR RICHARDSON, TX 75080		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	P LOUCKS, PAT		CITY-ST-ZIP	2241 SALIENT RD MARIETTA, GA 30064		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	D BENDOCK, SCOTT		CITY-ST-ZIP	723 FIRST COTTON DR POWDER SPRINGS, GA 30127		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	D VASSEUR, CALVIN		CITY-ST-ZIP	29724 MARK BLVD MADISON HEIGHTS, MI 48071		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	DT SWEENEY, ROBERT		CITY-ST-ZIP	128 W 34TH ST LATONIA, KY 41015		TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	VP 1417 Rumstill Creek Circle		CITY-ST-ZIP	Niceville, FL 32578		TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP			TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: SIDNEY K. BROWN JR. <i>Sidney K Brown Jr</i> 01/04/06 850-678-2565 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																															