

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004763

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** SUMMERGATE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4801 CYPRESS WOODS DR.  
ORLANDO, FL 32811 US

**New Principal Place of Business:**

**Current Mailing Address:**

4801 CYPRESS WOODS DR.  
ORLANDO, FL 32811 US

**New Mailing Address:**

**FEI Number:** 59-3616994

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOWERS PROPERTY MANAGEMENT, INC.  
4801 CYPRESS WOODS DRIVE  
ORLANDO, FL 32811 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: PD  
Name: HARRIS, MICHAEL  
Address: 4897 CYPRESS WOOD DR. #6112  
City-St-Zip: ORLANDO, FL 32811

Title: D  
Name: PAULASKI, JEREMY  
Address: 4897 CYPRESS WOODS DRIVE, #6303  
City-St-Zip: ORLANDO, FL 32811

Title: D  
Name: FRANKLIN, BENJAMIN  
Address: 4881 CYPRESS WOODS DRIVE, #3214  
City-St-Zip: ORLANDO, FL 32811

Title: TD  
Name: GOLDBERG, SEYMOUR  
Address: 4881 CYPRESS WOODS DRIVE #3107  
City-St-Zip: ORLANDO, FL 32811

Title: VPD  
Name: MELLIN, RICHARD  
Address: 4881 CYPRESS WOODS DR # 3303  
City-St-Zip: ORLANDO, FL 32811

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:** MICHAEL HARRIS

PRES

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date