

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Oct 23, 2007  
Secretary of State**

DOCUMENT# N99000004535

**Entity Name:** SUMMERFIELD AT BAYSIDE LAKES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 327795044**New Mailing Address:**

FEI Number: 59-3623476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**JEFFERIES, BENJAMIN E  
770 NORTH DRIVE  
SUITE A  
MELBOURNE, FL 329349270 US**Name and Address of New Registered Agent:**HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 STE 5000  
LONGWOOD, FL 32779 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: JAMES W HART JR

10/23/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: JEFFERIES, BENJAMIN E  
Address: 770 NORTH DRIVE SUITE  
City-St-Zip: MELBOURNE, FL 329349270Title: VDS ( ) Delete  
Name: GOATLEY, COLEMAN  
Address: 770 NORTH DRIVE SUITE A  
City-St-Zip: MELBOURNE, FL 329349270Title: D ( ) Delete  
Name: FACCIOBENE, FRANK  
Address: 601 W EDGEWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32901Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: RUSS, MATT  
Address: 2130 WINDBROOK DR SE  
City-St-Zip: PALM BAY, FL 32909Title: VPD (X) Change ( ) Addition  
Name: GRANT, STEVE  
Address: 956 GARDENBROOK CT SE  
City-St-Zip: PALM BAY, FL 32909Title: SD (X) Change ( ) Addition  
Name: DALRYMPLE, MARY ANN  
Address: 936 EASTERWOOD CT  
City-St-Zip: PALM BAY, FL 32909Title: TD ( ) Change (X) Addition  
Name: GOOD, ROBERT  
Address: 2054 WINDBROOK DR SE  
City-St-Zip: PALM BAY, FL 32909

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: MATT RUSS

PD

10/23/2007

Electronic Signature of Signing Officer or Director

Date