

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUN 30 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000086440(0)

1. Corporation Name

SUMMIT MANAGEMENT CORPORATION

Principal Place of Business

Mailing Address

995 LITTLE CREEK RD.
ORLANDO, FL 32825

995 LITTLE CREEK RD
ORLANDO, FL ~~32825~~
32825

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

3. Date Incorporated or Qualified

3a. Date of Last Report

10/21/96

N/A

4. FET Number

59-3415001

100512

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEVEN M. SCHNECK
995 LITTLE CREEK RD.
ORLANDO, FL 32825

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D SCHNECK, STEVEN M
995 LITTLE CREEK RD.
ORLANDO, FL 32825

☐ DELETE

12.2 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D MORROW, STEVEN T.
995 LITTLE CREEK RD.
ORLANDO, FL 32825

☐ DELETE

12.3 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D CARTWRIGHT, William
995 LITTLE CREEK RD.
ORLANDO, FL 32825

☐ DELETE

12.4 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

12.5 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

12.6 TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

21.1 TITLE

22.2 NAME

23.3 STREET ADDRESS

24.4 CITY-ST-ZIP

31.1 TITLE

32.2 NAME

33.3 STREET ADDRESS

34.4 CITY-ST-ZIP

41.1 TITLE

42.2 NAME

43.3 STREET ADDRESS

44.4 CITY-ST-ZIP

51.1 TITLE

52.2 NAME

53.3 STREET ADDRESS

54.4 CITY-ST-ZIP

61.1 TITLE

62.2 NAME

63.3 STREET ADDRESS

64.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: STEVEN T. MORROW ST

5/12/97 (407) 896-1537

CP2E034 (9/96)