2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000015884

1. Entity Name
SUMMERCORP, INC.

Principal Place of Business
5323 61ST AVENUE SOUTH
ST. PETERSBURG, FL 33715 US

Mailing Address
P.O. BOX 10098
GREENSBORO, NC 27404 US

04232004 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-3432293

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GLEIM, HOLGER D
150 SECOND AVENUE NORTH
SUITE 1100
ST PETERSBURG, FL 33701

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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 ______________________________

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000155498
05/05/04--00078--019 150.00

10. OFFICERS AND DIRECTORS

TITLE	PDT
NAME	SUMMERFORD, HAROLD C
STREET ADDRESS	5323 61ST AVENUE SOUTH
CITY ST ZIP	ST. PETERSBURG, FL 33715
TITLE	V
NAME	SUMMERFORD, ALLEN P.
STREET ADDRESS	129 HORNIBLOW POINT RD
CITY ST ZIP	EDENTON, NC 27932
TITLE	VS
NAME	MELHEM, MICHAEL R.
STREET ADDRESS	6400 WELLSTONE COURT
CITY ST ZIP	GREENSBORO, NC 27410
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
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 exemption stated in Section 119.07(3)(i), 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 607, 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: Michael R. Melhem Michael R. Melhem, V.S. 4-28-04 336-282-3030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR