

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S51498

FILED
Apr 29, 2009
Secretary of State

Entity Name: SUMMERWOOD GARDENS, INC.

Current Principal Place of Business:

11711 TARPON SPRINGS ROAD
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

11711 TARPON SPRINGS ROAD
ODESSA, FL 33556

New Mailing Address:

FEI Number: 59-3069292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THWAITES, RICHARD L.
11711 TARPON SPRINGS ROAD
ODESSA, FL 33556 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THWAITES, RICHARD L
Address: 11711 TARPON SPRINGS RD
City-St-Zip: ODESSA, FL 33556

Title: S () Delete
Name: THWAITES, CARROL Y
Address: 11711 TARPON SPRINGS RD
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: THWAITES, JEFFERY
Address: 11711 TARPON SPRINGS RD
City-St-Zip: ODESSA, FL 33556

Title: T () Delete
Name: STEWART, SHARON
Address: 39 VALENCIA CIR
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD L THWAITES

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date