

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005990

Entity Name: SUMMIT LAKE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

C/O DAVENPORT PROFESSIONAL PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
LAKE WORTH, FL 33467

Current Mailing Address:

C/O DAVENPORT PROFESSIONAL PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
LAKE WORTH, FL 33467 US

FEI Number: 65-1070281**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

LAW OFFICE OF J.M. CUNHA, P.A.
601 HERITAGE DR
STE 424
JUPITER, FL 33458 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: LAW OFFICE OF J.M. CUNHA

01/19/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name VASQUEZ, JOSE
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title VP
Name GUISAO, ORLOVEY
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title TREASURER
Name CEICEDO, REYNALDO
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY
Name ORTEGA, ALVARO
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name BLANDON, BLANCA
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name ARCILA, LUIS
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name FLORES, CATALINA
Address C/O DAVENPORT PROFESSIONAL
PROPERTY MANAGEMENT LLC
6620 LAKE WORTH ROAD SUITE F
City-State-Zip: LAKE WORTH FL 33467

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: JOSE VASQUEZ

PRESIDENT

01/19/2024

