

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01279

FILED
Mar 27, 2018
Secretary of State
CC6324306218**Entity Name:** SUMMERWINDS OF JUPITER HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC
140 INTRACOASTAL POINTE DR. SUITE 306
JUPITER, FL 33477**Current Mailing Address:**C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC
140 INTRACOASTAL POINTE DR. SUITE 306
JUPITER, FL 33477 US**FEI Number:** 59-2532782**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FIELDS & BACHOVE PLLC
4440 PGA BLVD STE 308
PALM BEACH GARDENS, FL 33410 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	MICOLO, KIMBERLEE
Address	C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306
City-State-Zip:	JUPITER FL 33477

Title	DIRECTOR
Name	CLARK, CHARLIE
Address	C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306
City-State-Zip:	JUPITER FL 33477

Title	SECRETARY
Name	LAUDERBACK, PAM
Address	C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306
City-State-Zip:	JUPITER FL 33477

Title	VP
Name	HEISSNER, LYNN
Address	C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306
City-State-Zip:	JUPITER FL 33477

Title	DIRECTOR
Name	MAZOTTA, ELLIE
Address	C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306
City-State-Zip:	JUPITER FL 33477

Title	TREASURER
Name	PALMER, JILL
Address	C/O REALTIME PROPERTY MANAGEMENT OF SOUTH FLORIDA, LLC 140 INTRACOASTAL POINTE DR. SUITE 306
City-State-Zip:	JUPITER FL 33477

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: KIMBERLEE MICOLO**PRESIDENT****03/27/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date