2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2025
Secretary of State
6674660309CC

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Entity Name: SOUTH COVE AT SUMMERFIELD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

VANGUARD MANAGEMENT GROUP, LLC
10500 UNIVERSITY CENTER DR. SUITE 190
TAMPA, FL 33612

Current Mailing Address:

VANGUARD MANAGEMENT GROUP, LLC
10500 UNIVERSITY CENTER DR. SUITE 190
TAMPA, FL 33612 US

FEI Number: 20-0982442

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VANGUARD MANAGEMENT GROUP, LLC
VANGUARD MANAGEMENT GROUP, LLC
10500 UNIVERSITY CENTER DR. SUITE 190
TAMPA, FL 33612 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: JANNA WINFIELD 03/11/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY	Title	VP
Name	BIELEWICZ, GEORGE	Name	KNIGHT, CHERYL
Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190	Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190
City-State-Zip:	TAMPA FL 33612	City-State-Zip:	TAMPA FL 33612
Title	DIRECTOR	Title	PRESIDENT
Name	WILLIAMS, GREG	Name	LAUPER, FRED
Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190	Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190
City-State-Zip:	TAMPA FL 33612	City-State-Zip:	TAMPA FL 33612
Title	DIRECTOR	Title	DIRECTOR
Name	PEREIRA, ANDREW	Name	REHBAUM, STEPHEN
Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190	Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190
City-State-Zip:	TAMPA FL 33612	City-State-Zip:	TAMPA FL 33612
Title	TREASURER		
Name	SILVA, DANIEL		
Address	VANGUARD MANAGEMENT GROUP, LLC 10500 UNIVERSITY CENTER DR. SUITE 190		
City-State-Zip:	TAMPA FL 33612		

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, LAUPER, FRED	PRESIDENT	03/11/2025
Electronic Signature of Signing Officer/Director Detail		Date