

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000008167

**Entity Name:** SUMMERVILLE RESORT HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 05, 2024**  
**Secretary of State**  
**1341068916CC**

**Current Principal Place of Business:**

C/O REALMANAGE  
200 S ORANGE AVE SUITE 1475  
ORLANDO, FL 32801

**Current Mailing Address:**

C/O REALMANAGE  
P O BOX 803555  
DALLAS, TX 75380 US

**FEI Number: 81-2354143**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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            PINTO, MARTONIO  
Address        C/O REALMANAGE  
                  200 S ORANGE AVE SUITE 1475  
City-State-Zip: ORLANDO FL 32801

Title            VP, SECRETARY  
Name            FREIRE, ALEXIS  
Address        C/O REALMANAGE  
                  200 S ORANGE AVE SUITE 1475  
City-State-Zip: ORLANDO FL 32801

*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: MARTONIO PINTO**

**PRESIDENT**

**04/05/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date