

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

DOCUMENT# N22000004402

**Entity Name:** SUMMERLAKE RESERVE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 23, 2024**  
**Secretary of State**  
**5124210079CC**

**Current Principal Place of Business:**

225 LAND GRANT STREET  
SUITE 5  
SAINT AUGUSTINE, FL 32092

**Current Mailing Address:**

225 LAND GRANT STREET  
SUITE 5  
SAINT AUGUSTINE, FL 32092 US

**FEI Number:** 92-1055799

**Certificate of Status Desired:** No

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

PRIORITY COMMUNITY MANAGEMENT  
225 LAND GRANT STREET  
SUITE 5  
SAINT AUGUSTINE, FL 32092 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:** MICHELLE SUTTON

04/23/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name WILLBUR, MEGAN  
Address 225 LAND GRANT STREET  
SUITE 5  
City-State-Zip: SAINT AUGUSTINE FL 32092

Title DVP  
Name VILLAR, LIA  
Address 225 LAND GRANT STREET  
SUITE 5  
City-State-Zip: SAINT AUGUSTINE FL 32092

Title DST  
Name PRODOEHL, DOUG  
Address 225 LAND GRANT STREET  
SUITE 5  
City-State-Zip: SAINT AUGUSTINE FL 32092

*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:** MEGAN WILLBUR

**PRESIDENT**

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date