

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

DOCUMENT# N32139

**Entity Name:** SUMMER CHASE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**8335 LAKE CYPRESS ROAD  
LAKE WORTH, FL 33467**Current Mailing Address:**2101 CENTREPARK W DRIVE  
SUITE 110  
WEST PALM BEACH, FL 33409 US**FEI Number:** 65-0140824**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KONYK, CHELLE ESQ.  
140 INTRACOASTAL POINTE DR  
STE 310  
JUPITER, FL 33477 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:** CHELLE KONYK ESQ

01/05/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SOSNOWSKI, ROBERT  
Address        8241 LAKE CYPRESS RD  
City-State-Zip: LAKE WORTH FL 33467

Title            TREASURER  
Name            SASSCER, WILLIAM  
Address        4046 SUMMER CHASE  
City-State-Zip: LAKE WORTH FL 33467

Title            VP, SECRETARY  
Name            NIEVES , AIXA  
Address        4042 SUMMER CHASE CT  
City-State-Zip: LAKE WORTH FL 33467

Title            DIRECTOR  
Name            NEAL, TOBI  
Address        8340 LAKE CYPRESS RD  
City-State-Zip: LAKE WORTH FL 33467

Title            DIRECTOR  
Name            SEIDER, MARVIN  
Address        3877 SUMMER CHASE  
City-State-Zip: LAKE WORTH FL 33467

Title            SECRETARY  
Name            LOWENTHAL, RICHARD  
Address        8381 WINTER SPRING LANE  
City-State-Zip: LAKE WORTH FL 33467

Title            DIRECTOR  
Name            STEINHART , ALBERT  
Address        8520 LAKE CYPRESS RD  
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:** ROBERT SOSNOWSKI

PRESIDENT.

01/05/2024

Electronic Signature of Signing Officer/Director Detail

Date