

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002555

Entity Name: SUMMERHILL ESTATES HOMEOWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**C/O 8389 NW 57TH DRIVE
CORAL SPRINGS, FL 33067**Current Mailing Address:**PO BOX 9195
CORAL SPRINGS, FL 33075**FEI Number: 65-0425058****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GREENSPOON MARDER, P.A.
ATTN: LARRY CORMAN, ESQ.
2255 GLADES RD, SUITE 414-E
BOCA RATON, FL 33431 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	S
Name	VONHOFFEN, LISA
Address	8581 NW 57TH DR
City-State-Zip:	CORAL SPRINGS FL 33067

Title	D
Name	ALSPACH, JERRY
Address	8564 NW 57TH DR.
City-State-Zip:	CORAL SPRINGS FL 33067

Title	P
Name	ANDRA, DENNIS
Address	8301 NW 57 DR
City-State-Zip:	CORAL SPRINGS FL 33067

Title	D
Name	GAIL, ROEHRIG
Address	8516 NW 57 DR
City-State-Zip:	CORAL SPRINGS FL 33067

Title	D
Name	NUNEZ, JOSEPHINE
Address	8331 NW 57TH DRIVE
City-State-Zip:	CORAL SPRINGS FL 33067

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: LISA VONHOFFEN**SECRETARY****03/10/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date