

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766483

FILED
Apr 30, 2007
Secretary of State

Entity Name: LONG HAMMOCK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3200 RIVER RANCH BLVD
RIVER RANCH, FL 33867

New Principal Place of Business:

Current Mailing Address:

C/O BARBARA H. SMITH, CPA
P.O. BOX 985
FROSTPROOF, FL 33843 US

New Mailing Address:

FEI Number: 59-2591004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOWAY, ALBERT C JR
225 E PARK AVENUE
LAKE WALES, FL 33859 US

Name and Address of New Registered Agent:

SMITH, BARBARA H CPA
124 MAXCY LANE
FROSTPROOF, FL 33843 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: BARBARA H SMITH

04/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: PETERSON, ROGER G
Address: 95 ROAN ROAD
City-St-Zip: RIVER RANCH, FL 33867

Title: DS () Delete
Name: MORRIS, MARY R
Address: 34 W APPALOOSA TRL
City-St-Zip: RIVER RANCH, FL 33867

Title: DP () Delete
Name: FLAGG, JACK
Address: 109 E APPALOOSA TRAIL
City-St-Zip: RIVER RANCH, FL 33867

Title: D () Delete
Name: ESTEY, WAYNE
Address: 42 PALOMINO PATH
City-St-Zip: RIVER RANCH, FL 33867

Title: D () Delete
Name: BUSHBY, JAMES
Address: 67 PALOMINO PATH
City-St-Zip: RIVER RANCH, FL 33867

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: KANITZ, NORMA J
Address: 93 ROAN ROAD
City-St-Zip: RIVER RANCH, FL 33867

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SPANGLER, BOYD
Address: 41 PALOMINO PATH
City-St-Zip: RIVER RANCH, FL 33867

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NORMA J KANITZ

T

04/30/2007

Electronic Signature of Signing Officer or Director

Date