

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000002420

FILED
Feb 25, 2002 8:00 AM
Secretary of State

Entity Name: THE HAMMOCK BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5 BLUE HERON LN.
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

5 BLUE HERON LN.
PALM COAST, FL 32137

New Mailing Address:

1 FLORIDA PARK DRIVE SOUTH
SUITE 300
PALM COAST, FL 32137

FEI Number: 59-3747502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZEHNER, TODD
5 BLUE HERON LN.
PALM COAST, FL 32137

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HUFFSTETLER, BRADLEY
Address: 1813 HAMPTON ST.
City-St-Zip: COLUMBIA, SC 29201

Title: D () Delete
Name: ZEHNER, TODD
Address: 5 BLUE HERON LN.
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: MASTERS, ROBERT F II
Address: 5 BLUE HERON LN.
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUFFSTETLER, BRADLEY
Address: 4 HAMMOCK BEACH PARKWAY
City-St-Zip: PALM COAST, FL 32137

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

Title: D (X) Change () Addition
Name: MASTERS, ROBERT F II
Address: 1 FLORIDA PARK DRIVE SOUTH, SUITE 300
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT F. MASTERS, II

D

02/25/2002

Electronic Signature of Signing Officer or Director

Date