

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725625

**FILED**  
**Feb 16, 2017**  
**Secretary of State**  
**CC2785915416**

**Entity Name:** HUTCHINSON HOUSE CONDOMINIUM, INC.

**Current Principal Place of Business:**

1550 NE OCEAN BLVD.  
G-101  
STUART, FL 34996

**Current Mailing Address:**

1550 NE OCEAN BLVD.  
G-101  
STUART, FL 34996 US

**FEI Number: 59-1575104**

**Certificate of Status Desired: No**

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

BECKER & POLIAKOFF, P.A.  
C/O KENNETH S. DIREKTOR  
401 S.E. OSCEOLA STREET SUITE 101  
STUART, FL 34994 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            PRESIDENT  
Name            ALLAN, GOODE  
Address        1550 NE OCEAN BLVD.  
                  G-101  
City-State-Zip: STUART FL 34996

Title            DIRECTOR  
Name            DAKIN, ROBERT  
Address        1550 NE OCEAN BLVD.  
                  G-101  
City-State-Zip: STUART FL 34996

Title            ASST. SECRETARY  
Name            HAMERINK, STEVE  
Address        1550 NE OCEAN BLVD.  
                  G-101  
City-State-Zip: STUART FL 34996

Title            TREASURER  
Name            HUGHES, WILLIAM  
Address        1550 NE OCEAN BLVD A-207  
City-State-Zip: STUART FL 34996

Title            VP  
Name            FOLEY, JAMES  
Address        1550 NE OCEAN BLVD.  
                  G-101  
City-State-Zip: STUART FL 34996

Title            DIRECTOR  
Name            BUTTINEAU, DAN  
Address        1550 NE OCEAN BLVD.  
                  G-101  
City-State-Zip: STUART FL 34996

Title            SECRETARY  
Name            BRADLEY, GRACE  
Address        1550 NE OCEAN BLVD.  
                  G-101  
City-State-Zip: STUART FL 34996

*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: ALLAN GOODE**

**PRESIDENT**

**02/16/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date