## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007225

Entity Name: CAMBRIA AT HAMMOCK DUNES CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

2 CAMINO DEL MAR PALM COAST, FL 32137

**Current Mailing Address:** 

POST OFFICE BOX 352031 PALM COAST, FL 32135

FEI Number: 20-3157585 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUTHERN STATES MANAGEMENT GROUP, INC. 2 CAMINO DEL MAR PALM COAST, FL 32137 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

FILED Apr 27, 2015

**Secretary of State** 

CC2829625093

Officer/Director Detail:

Title PD Title TD

Name TAYLOR, JEAN A Name HAWKINS, DAVID H

Address POST OFFICE BOX 352031 Address POST OFFICE BOX 352031

City-State-Zip: PALM COAST FL 32137 City-State-Zip: PALM COAST FL 32135

Title VPD Title SD

Name BAGDON, ROBERT Name SONTAG, DAN

Address POST OFFICE BOX 352031 Address POST OFFICE BOX 352031

City-State-Zip: PALM COAST FL 32135 City-State-Zip: PALM COAST FL 32135

Title D

Name WAHL, WALTER

Address POST OFFICE BOX 352031 City-State-Zip: PALM COAST FL 32135

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: JEAN A TAYLOR

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/27/2015