## 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: CHRISTIAN SWANN

Electronic Signature of Signing Officer/Director Detail

### **Current Mailing Address:** 1416 E CONCORD ST ORLANDO, FL 32803 US

### FEI Number: 87-3896620

# Name and Address of Current Registered Agent:

EDISON ASSOCIATION MANAGEMENT 1416 E CONCORD ST ORLANDO, FL 32803 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: TRACY DURHAM

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

PRESIDENT Title Name SWANN, CHRISTIAN Address 1416 E CONCORD ST City-State-Zip: ORLANDO FL 32803

PRESIDENT

Certificate of Status Desired: No

FILED Apr 30, 2024

Secretary of State

6202296234CC

04/30/2024 Date

04/30/2024 Date

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000011620

Entity Name: FOX LAKE HAMMOCK OWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

1416 E CONCORD ST ORLANDO, FL 32803