

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32917

Entity Name: THE HAMMOCKS HOMEOWNER'S ASSOCIATION OF ORANGE COUNTY, INC.**FILED**
Apr 28, 2022
Secretary of State
8240309976CC**Current Principal Place of Business:**4700 MILLENIA BLVD
SUITE 515
ORLANDO, FL 32839**Current Mailing Address:**4700 MILLENIA BLVD
SUITE 515
ORLANDO, FL 32839 US**FEI Number: 59-2983444****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ASSOCIA-COMMUNITY MANAGEMENT PROFESSIONALS, INC.
4700 MILLENIA BLVD
SUITE 515
ORLANDO, FL 32839 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: GABRIELA JAKOBSEN****04/28/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	JONES HICKS, JACQUELINE
Address	4700 MILLENIA BLVD SUITE 515
City-State-Zip:	ORLANDO FL 32839

Title	SECRETARY
Name	MCKEY, ROB
Address	4700 MILLENIA BLVD SUITE 515
City-State-Zip:	ORLANDO FL 32839

Title	PRESIDENT
Name	WALSHE, KELLE
Address	4700 MILLENIA BLVD SUITE 515
City-State-Zip:	ORLANDO FL 32839

Title	VP
Name	FERNANDEZ, HERIBERTO
Address	4700 MILLENIA BLVD SUITE 515
City-State-Zip:	ORLANDO FL 32839

Title	TREASURER
Name	HILL, GRADY
Address	4700 MILLENIA BLVD SUITE 515
City-State-Zip:	ORLANDO FL 32839

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: KELLE WALSHE**PRESIDENT****04/28/2022**

Electronic Signature of Signing Officer/Director Detail

Date