

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006958

Entity Name: HAMMOCKS HOA, INC.**Current Principal Place of Business:**LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
OSPREY, FL 34229**Current Mailing Address:**LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
OSPREY, FL 34229**FEI Number:** 65-0901097**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, JULIE
LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
OSPREY, FL 34229 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:** WILLIAMS, JULIE

03/11/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name WILLIAMS, JULIE
Address LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
City-State-Zip: OSPREY FL 34229

Title VP
Name BARAN, STEVEN
Address LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name ROSS, WENDY
Address LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
City-State-Zip: OSPREY FL 34229

Title TREASURER
Name HUYCK, KATHRYN
Address LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
City-State-Zip: OSPREY FL 34229

Title SECRETARY
Name CANDELA, FRANCES
Address LIGHTHOUSE PROPERTY MGMT
16 CHURCH ST
City-State-Zip: OSPREY FL 34229

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: JULIE WILLIAMS

PRESIDENT

03/11/2016

Electronic Signature of Signing Officer/Director Detail

Date