

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729427

FILED
Mar 02, 2011
Secretary of State

Entity Name: HAMMER POINT OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

MM93
TAVERNIER, FL 33070

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 90
TAVERNIER, FL 330700090

New Mailing Address:

P.O. BOX 90
TAVERNIER, FL 33070

FEI Number: 59-2757114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTH, VALERIE
128 FAIRWICH CT
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: HOPKINS, GORDON G
Address: 114 WESTMINSTER DR.
City-St-Zip: TAVERNIER, FL 33070

Title: VP
Name: MERLO, KATHY
Address: 158 WESTMINSTER DR
City-St-Zip: TAVERNIER, FL 33070

Title: S
Name: WOLTANSKI, SUE
Address: 146 WESTMINSTER DR
City-St-Zip: TAVERNIER, FL 33070

Title: TR
Name: BARTH, VALERIE
Address: 128 FAIRWICH CT
City-St-Zip: TAVERNIER, FL 33070

Title: ATR
Name: SPERRY, BETTY
Address: 109 WESTMINSTER DR
City-St-Zip: TAVERNIER, FL 33070

Title: PLM
Name: HOPKINS, GORDON
Address: 118 WESTMINSTER DR
City-St-Zip: TAVERNIER, FL 33070

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: V BARTH

TR

03/02/2011

Electronic Signature of Signing Officer or Director

Date