

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742316

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** THE HAMMOCK UNIT NO. 2 OWNERSHIP ASSOCIATION, INC.

**Current Principal Place of Business:**

5916 NW 91ST BLVD  
GAINESVILLE, FL 32653 US

**New Principal Place of Business:**

5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653 US

**Current Mailing Address:**

5916 NW 91ST BLVD  
GAINESVILLE, FL 32653 US

**New Mailing Address:**

5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653 US

**FEI Number:** 59-2541038

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOFFMAN, BRUCE E.  
16 S. MAIN ST.  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

LINDSEY, GLENDA  
BOSSHARDT PROPERTY MGT INC.  
5522 NW 43 STREET SUITE B  
GAINESVILLE, FL 32653 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: GLENDA LINDSEY

04/24/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: PAGE, ROBERT L  
Address: 5418 NW 92 WAY  
City-St-Zip: GAINESVILLE, FL 32653

Title: VD ( ) Delete  
Name: JOPLING, JOHN  
Address: 5323 N.W. 92ND WAY  
City-St-Zip: GAINESVILLE, FL 32653

Title: TD ( ) Delete  
Name: SANFORD, JEAN  
Address: 5916 NW 91ST BLVD  
City-St-Zip: GAINESVILLE, FL

Title: D ( ) Delete  
Name: CUNNINGHAM, ROBERT E  
Address: 5600 NW 91ST BLVD  
City-St-Zip: GAINESVILLE, FL 32653

Title: VD ( ) Delete  
Name: RUSSELL, DAVID  
Address: 5726 NW 91ST BLVD  
City-St-Zip: GAINESVILLE, FL 32653

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEAN SANFORD

TD

04/24/2006

Electronic Signature of Signing Officer or Director

Date