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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

758690

(2)

THE HAMMOCKS OF NAPLES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address 5535 RATTLESNAKE HAMMOCK ROAD 5535 RATTLESNAKE HAMMOCK ROAD 3. Date Incorporated or Qualified NAPLES FL 33962-4478 NAPLES FL 33962-4478 06/09/1981 4. FEI Number Applied For 59-0278022 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 28 Fee Required Suite, Apt. #. etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 22 27 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Yes □ No Zip Country Country ZiD 8. This corporation owes or has paid the current year Intangible Yes 24 28 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SANDBERG, PEGGY E Street Address (P.O. Box Number is Not Acceptable) 5535 RATTLESNAKE HMK #305 83 NAPLES FL 34113 84 City Zip Code 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. **SIGNATURE** Signature, typied or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1 1 T(T) F Sandburg, Peggy NAME 1.2 NAME **65**35 RATTLESNAKE HAM. #305 STREET ADDRESS 1.3 STREET ADDRESS NAPLES, FL 00000 CITY-ST-ZIP 1.4 C(TY-S1-7)P DELETE Change Addition TITLE 2.1 TITLE NAME **\$**Andberg, vern 2.2 NAME 5535 RATTLESNAKE HAM., #305 STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 2.4 CITY+ST-ZIP . ___ Change DELETE TITLE 3 1 TITLE Ardition BAVIELLO, SR M NAME 3.2 NAME **\$801 CRAYTON RD** 3.3 STREET ADDRESS STREET ADORESS NAPLES FL 3.4. CiTY-ST-ZIP CITY-ST-ZIP DELETE TITLE लागार B. Choate 3:46 **WILENSKY, HILDA** 4.2 NAME NAME 5535 Rattles, Naples, FL Rattlesnake Itan 5535 RATTLESNAKE HAM. RD #103 4.3 STREET ADDRESS STREET ADDRESS Naples fl 4.4 CITY-ST-ZIP CITY - ST- ZIP Sweet Whange DELETÉ MILL) TITLE NAME MALONEY, NORM 52 NAME 5535 Rattlesnake Ham STREET ADDRESS 5535 RATTLESNAKE HM,K #306 **5.3 STREET ADDRESS** #306 Naples fl 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE ETTITLE > MEYER, PHYLISS NAME 6.2 NAME 5535 RATTLESNAKE HMK #205 STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0/(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

R2E037 (10/97)

FILED

Jun 18 1998 8:00am

Secretary of State