2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759987

FILED Apr 06, 2006 Secretary of State

Entity Name: HAMMOCK PINE VILLAGE I ASSOCIATION, INC.

Current Principal Place of Business:			Ne	New Principal Place of Business:		
SUITE 305		HIGHWAY 19 NORTH 1 US	SU	00 US HIGHWA ITE 305 EARWATER, FL		
surrent Mailing Address:				New Mailing Address:		
	_	HIGHWAY 19 NORTH		00 US HIGHWA		
SUITE 305	5		SU	ITE 305		
LEARWA	ATER, FL 3376	1 US	CL	EARWATER, FL	33761 US	
El Number	: 59-2110433	FEI Number Applied For ()	FEI Number	Not Applicable ()	Certificate of Status Desired ()	
lame and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
RESOURCE PROPERTY MANAGEMENT 8100 UNITED STATES HIGHWAY 19 NORTH BUITE 305 CLEARWATER, FL 33761 US				RESOURCE PROPERTY MANAGEMENT 28100 US HIGHWAY 19 NORTH SUITE 305 CLEARWATER, FL 33761 US		
	e named entity s e of Florida.	ubmits this statement for the	purpose of ch	anging its registe	ered office or registered agent, or bot	
IGNATUI	RE:				04/06/2006	
	Electroni	c Signature of Registered Ag	ent		Date	
FFICER	S AND DIRECT	ORS:	AD	DITIONS/CHAN	IGES TO OFFICERS AND DIRECT	
itle: lame: ddress: :ity-St-Zip:	SENA, ANITA 2414 HAMMOCK				() Change () Addition	
itle:	SD () BURONOVSKY,		Title Nan	ne: HEATER	(X) Change ()Addition , ROBERT MMOCK PINE BLVD	
ame: ddress:	1801 HAMMOCK CLEARWATER,				/ATER, FL 33761	
lame: laddress: city-St-Zip: litle: lame: laddress: city-St-Zip:	CLEARWATER, PD () THORPE, RAY 2306 HAMMOCK	FL 33761 Delete CPINE BLVD	City Title Nan Add	-St-Zip: CLEARW : PD ne: DROLET ress: 2114 HA	(X) Change () Addition	
ame: ddress: ity-St-Zip: itle: ame: ddress:	CLEARWATER, PD () THORPE, RAY 2306 HAMMOCK CLEARWATER, VD () DROLET, PAUL	FL 33761 Delete (PINE BLVD FL 33761 Delete (PINE BOULEVARD	City Title Nan Add City Title Nan Add	-St-Zip: CLEARW : PD ne: DROLET ress: 2114 HAI -St-Zip: CLEARW : VPD ne: WIEBE, ress: 2109 HAI	(X) Change () Addition ; PAUL MMOCK PINE BLVD /ATER, FL 33761 (X) Change () Addition	

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: PAUL DROLET DP 04/06/2006