

FILE NOW: FILING FEE AFTER MAY 1 IS \$55.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 765893 (3)
1. Corporation Name
THE HAMMOCK NORTH OWNERSHIP ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/29/1982	3a. Date of Last Report 04/29/1994
4. FEI Number 59-2861170	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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9. Name and Address of Current Registered Agent

**HODOR, HOWARD
2700 N.W. 43RD ST. STE D
GAINESVILLE FL 32608**

10. Name and Address of Now Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85 Zip Code**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when resigning) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GILLETTE, P 6313 NW 93RD TERR GAINESVILLE FL	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP	PD Lanza Kaduce L 9712 63rd Lane Gainesville FL ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ROTTMANN, G 9715 NW 63RD LN GAINESVILLE FL	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP	Connelly D VD 6310 NW 93rd Terrace Gainesville FL 32653 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JONES, B 6325 NW 97TH CT GAINESVILLE FL	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP	George Rottmann Treasurer 9715 NW 63 Lane Gainesville, FL 32653 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD CONNELLY, DAWN F. 6310 NW 93RD TERRACE GAINESVILLE FL	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	Deverly R Jones 6325NW 97th Court Gainesville, FL 32653 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WRIGHT, P 9606 NW 62ND LN GAINESVILLE FL	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP	Dave Henderson 9702 NW 63rd Lane Gainesville FL 32653 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY - ST - ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____

GEORGE ROTTMANN 4/28/95 3750936
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR