

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765893

FILED
Feb 15, 2011
Secretary of State

Entity Name: THE HAMMOCK NORTH OWNERSHIP ASSOCIATION, INC.

Current Principal Place of Business:

6415 NW 97TH CT
GAINESVILLE, FL 32653 US

New Principal Place of Business:

Current Mailing Address:

6415 NW 97TH CT
GAINESVILLE, FL 32653 US

New Mailing Address:

FEI Number: 59-2861170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, NEAL P
6415 NW 97 COURT
GAINESVILLE, FL 32653 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: WALTERS, FRANK
Address: 6313 NW 93 TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: LIAS
Name: VANDIVER, VERNON
Address: 9715 NW 63 LN
City-St-Zip: GAINESVILLE, FL 32653

Title: T
Name: COHEN, NEAL
Address: 6415 NW 97TH CT
City-St-Zip: GAINESVILLE, FL 32653

Title: S
Name: LANZA-KADUCE, LONN
Address: 9712 NW 63 LN
City-St-Zip: GAINESVILLE, FL 32653

Title: VP
Name: WILLIAMS, DAVID
Address: 10012 NW 62 LN
City-St-Zip: GAINESVILLE, FL 32653

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: NEAL P COHEN

TREA

02/15/2011

Electronic Signature of Signing Officer or Director

Date