

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000008679

FILED  
Feb 09, 2012  
Secretary of State

**Entity Name:** HAMMOCK BEACH CIRCLE, LLC

**Current Principal Place of Business:**

1 OCEAN RIDGE BLVD, N  
PALM COAST, FL 32137 US

**New Principal Place of Business:**

195 AVENUE DE LA MER  
103  
PALM COAST, FL 32137 US

**Current Mailing Address:**

1 OCEAN RIDGE BLVD, N  
PALM COAST, FL 32137 US

**New Mailing Address:**

195 AVENUE DE LA MER  
103  
PALM COAST, FL 32137 US

**FEI Number:** 26-4148708

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: OHARA, THOMAS  
Address: 195 AVENUE DE LA MER, #103  
City-St-Zip: PALM COAST, FL 32137

Title: MGRM  
Name: O'HARA, JANET T  
Address: 195 AVENUE DE LA MER, #103  
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS OHARA

MGRM

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date