

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004912

Entity Name: HAMMOCK COVE, LLC

FILED
Mar 03, 2006
Secretary of State

Current Principal Place of Business:

1436 GORMICAN LANE
NAPLES, FL 34110

New Principal Place of Business:

3003 TAMIAMI TRAIL N
SUITE 220
NAPLES, FL 34103

Current Mailing Address:

1436 GORMICAN LANE
NAPLES, FL 34110

New Mailing Address:

3003 TAMIAMI TRAIL N
SUITE 220
NAPLES, FL 34103

FEI Number: 32-0159410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

MARKOFF, HOWARD F
3003 TAMIAMI TRAIL N
SUITE 220
NAPLES, FL 34103 US

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: HOWARD F. MARKOFF

03/03/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KASSOLIS, DUKE S
Address: 1436 GORMICAN LANE
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KASSOLIS, DUKE S
Address: 3003 TAMIAMI TRAIL N
City-St-Zip: NAPLES, FL 34103

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 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: DUKE S KASSOLIS

MEMB

03/03/2006

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