2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90027 044 ****61.25

DOCUMENT # N00000006622

1. Entity Name

THE HAMMOCKS RESIDENTIAL COMMUNITY ASSOCIATION, INC.

659218

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1096 Old Highway 98 C-102B Destin, FL 32550	

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	7900 Glades Road Suite, Apt. #, etc. Suite 200
City & State	City & State Boca Raton, FL
Zip / Country	Zip 33434 / Country USA

4. FEI Number 59-3698297 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BARIC, JOHN
7900 GLADES ROAD
SUITE 200
BOCA RATON FL 33434

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Is Not Acceptable)

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARKWELL, RAY 2800 N. Hwy. 77 Lynn Haven, FL 32444	☐ Delete	T/D MARKWELL, ALVIN RAY 2800 N. Hwy. 77 Lynn Haven, FL 32444	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NADLER, STEVEN 2800 N. Hwy. 77 Lynn Haven, FL 32444	☐ Delete	V/D NADLER, STEVEN 2800 N. Hwy. 77 Lynn Haven, FL 32444	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUKE, DOUG 2800 N. Hwy. 77 Lynn Haven, FL 32444	☐ Delete	P/D DUKE, DOUG 2800 N. Hwy. 77 Lynn Haven, FL 32444	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S GREENE, WILLIAM B. 1701 E. County Hwy. 30A Santa Rosa Beach, FL 32459	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4/27/01 850 231-6565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #