

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007037

FILED
Mar 27, 2009
Secretary of State

Entity Name: HAMMOCK RIDGE UNIT III HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1731 N.W. 6TH STREET
SUITE A
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 14506
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 59-3773786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ED BAUR MANAGEMENT, INC.
1731 N.W. 6TH STREET
SUITE A
GAINESVILLE, FL 32609 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 () Delete
Name: JAMES, SMALL
Address: 10478 SW 104TH AVE.
City-St-Zip: GAINESVILLE, FL 32608

Title: VP () Delete
Name: NARVESON, BETSY
Address: 9106 SW 96TH TERR
City-St-Zip: GAINESVILLE, FL 32608

Title: S () Delete
Name: DENESE, DIAZ
Address: 10384 SW 104TH AVENUE
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: HOWARD, CARRIE
Address: 9685 SW 95TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: TUCK, DAVID
Address: 9267 SW 96TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOCHSTEIN, JOANN
Address: 9121 SW 96TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: VP (X) Change () Addition
Name: DIAZ, DENESE
Address: 10384 SW 104TH AVENUE
City-St-Zip: GAINESVILLE, FL 32608

Title: S (X) Change () Addition
Name: HOLZSCHUHER, CHARLES
Address: 10179 SW 98TH TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HOWELL, KURT
Address: 10515 SW 104TH AVENUE
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOANN HOCHSTEIN

P

03/27/2009

Electronic Signature of Signing Officer or Director

Date