

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007470

FILED
Jan 25, 2007
Secretary of State

Entity Name: RIVER OAKS IN THE HAMMOCK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

17 RIVER OAKS WAY
PALM COAST, FL 32137 US

New Principal Place of Business:

51 ATLANTIC DRIVE
PALM COAST, FL 32137 US

Current Mailing Address:

17 RIVER OAKS WAY
PALM COAST, FL 32137 US

New Mailing Address:

51 ATLANTIC DRIVE
PALM COAST, FL 32137 US

FEI Number: 02-0580304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VINNICK, SHANNON
17 RIVER OAKS WAY
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

LAMB, DAVID A
51 ATLANTIC DRIVE
PALM COAST, FL 32137 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: DAVID A. LAMB

01/25/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VINNICK, SHANNON
Address: 17 RIVER OAKS WAY
City-St-Zip: PALM COAST, FL 32135

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LIPTON, RICHARD DR.
Address: 1704 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND BEACH,, FL 32176

Title: DIR () Change (X) Addition
Name: LAMB, DAVID A
Address: 51 ATLANTIC DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: DIR () Change (X) Addition
Name: KOVALTCHOUK, IGOR
Address: 2690 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND BEACH,, FL 32176

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 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: DAVID A. LAMB

DIR

01/25/2007

Electronic Signature of Signing Officer or Director

Date