

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008488

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** HAMMOCK LAKES I & II HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

9769 S DIXIE HWY STE 201  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

9769 S DIXIE HWY STE 201  
MIAMI, FL 33156

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

HART, BRIAN A  
2333 PONCE DE LEON BOULEVARD  
SUITE 303  
CORAL GABLES, FL 331340000 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: OGDEN, RICHARD W  
Address: 5590 S.W. 92 STREET  
City-St-Zip: CORAL GABLES, FL 33156

Title: D ( ) Delete  
Name: HICKEY, ED  
Address: 9231 SCHOOL HOUSE ROAD  
City-St-Zip: CORAL GABLES, FL 33156

Title: D ( ) Delete  
Name: BROCKWAY, PAULA  
Address: 4835 HAMMOCK LAKE DR.  
City-St-Zip: CORAL GABLES, FL 33156

Title: SD ( ) Delete  
Name: NEITZEL, JULIE  
Address: 5601 HAMMOCK DRIVE  
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete  
Name: SAGER, BERT  
Address: 9000 SCHOOL HOUSE ROAD  
City-St-Zip: MIAMI, FL 33156

Title: PD ( ) Delete  
Name: FREELAND, JORGE  
Address: 8901 LAKE DRIVE COURT  
City-St-Zip: CORAL GABLES, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

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: RICHARD W OGDEN

VD

05/01/2008

Electronic Signature of Signing Officer or Director

Date