

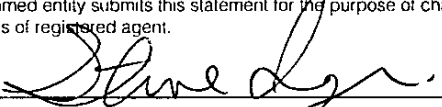
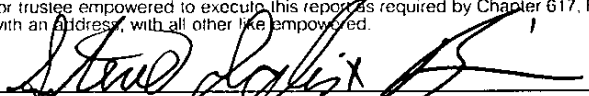


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N01000008561 1. Entity Name CLOCKTOWER HAMMOCK HOMEOWNERS ASSOCIATION INC.			FILED 06 APR 28 PM 4:47 
Principal Place of Business 204 CLOCKTOWER DRIVE JUPITER FL 33458		Mailing Address PO BOX 31281 WEST PALM BEACH FL 33420	
2. Principal Place of Business c/o Bristol Management Services Inc 1930 Commerce Lane, Suite 1 Jupiter FL 33458	3. Mailing Address c/o Bristol Bristol 930 Commerce Ln #1 Jupiter FL 33458		1st MOORE CR2E037 (10/05) 4. FEI Number 65-1157480 Applied For <input type="checkbox"/> Not Applicable
6. Name and Address of Current Registered Agent DAVIS, KENNETH 18904 SE JUPITER RIVER DRIVE JUPITER FL 33458		7. Name and Address of New Registered Agent Name Steve Inglis, PCAM Street Address (P.O. Box Number is Not Acceptable) 1930 Commerce Ln #1 City Jupiter FL Zip Code 33458	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 4/16/06 <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, KENNETH PO BOX 31281 PALM BEACH GARDENS FL 33420	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <input type="checkbox"/> Change <input type="checkbox"/> Addition 1000000461368- 03-29-06-00045-024-51.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRISKIN, CHRISTINE PO BOX 31281 PALM BEACH GARDENS FL 33420	<input type="checkbox"/> Change <input type="checkbox"/> Addition 03/30	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORRA, ARIEL PO BOX 31281 PALM BEACH GARDENS FL 33420	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100074459831 05/12/06--01005--012 **61.85	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition B 5/6/06	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 fee empowered.			
SIGNATURE:  3-1-2006			