

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009761

FILED
Mar 13, 2012
Secretary of State

Entity Name: CORAL HAMMOCK HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

201 FRONT STREET
SUITE 103
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

201 FRONT STREET
SUITE 103
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 56-2470932

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTIAN, STERLING J
201 FRONT STREET
SUITE 103
KEY WEST, FL 33040 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: PD
Name: TELLERD, CRAIG
Address: 896 CORPORATE WAY #440
City-St-Zip: WEST LAKE, OH 44145

Title: SD
Name: FAHEY, BARBARA
Address: 39 CORAL WAY
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: PARKER, KIMBERLY
Address: 3908 RYALWOOD COURT
City-St-Zip: TAMPA, FL 33596

Title: D
Name: MASTER, GARY
Address: 896 CORPORATE WAY # 440
City-St-Zip: WESTLAKE, OH 44145

Title: VPD
Name: VAN LOON, DAVID
Address: 21 SAPPHIRE DRIVE
City-St-Zip: KEY WEST, FL 33040

Title: TD
Name: SCROGGINS, DONNA
Address: 18784 SE JUPITER RIVER DRIVE
City-St-Zip: JUPITER, FL 33458

I hereby 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 all other like empowered.

SIGNATURE: CRAIG TELLERD

PD

03/13/2012

Electronic Signature of Signing Officer or Director

Date