

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002509

FILED
Feb 09, 2011
Secretary of State

Entity Name: OAK HAMMOCK AT THE BROOKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5801 PELICAN BAY BLVD, STE 600
NAPLES, FL 34108

New Principal Place of Business:

26025 CLARKSTON DRIVE
BONITA SPRINGS, FL 34135

Current Mailing Address:

5801 PELICAN BAY BLVD, STE 600
NAPLES, FL 34108

New Mailing Address:

26025 CLARKSTON DRIVE
BONITA SPRINGS, FL 34135

FEI Number: 03-0512659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON, GARY
23206 OAKGLEN LANE
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

RAUBOLT, ROBERT R
26025 CLARKSTON DRIVE
BONITA SPRINGS, FL 34135 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: ROBERT R RAUBOLT

02/09/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WRIGHT, T J
Address: 10492 AUTUMN BREEZE DRIVE #101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: HINIKER, GARY E
Address: 10402 AUTUMN BREEZE DR #102
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD
Name: SUTTON, FAYE
Address: 10422 AUTUMN BREEZE DR #201
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VPD
Name: PORTER, MARVIN
Address: 10311 AUTUMN BREEZE DR. #201
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D
Name: KORFHAGE, GLENN
Address: 208 ARROWHEAD DR
City-St-Zip: LAKE JACKSON, TX 77566

Title: TD
Name: O'NEAL, PATRICK
Address: 10412 AUTUMN BREEZE DR #102
City-St-Zip: BONITA SPRINGS, FL 34135

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: T. J. WRIGHT

PD

02/09/2011

Electronic Signature of Signing Officer or Director

Date