

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003677

FILED
Mar 30, 2011
Secretary of State

Entity Name: EAGLES HAMMOCK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10036 SAWGRASS DR. W
SUITE 1
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

C/O MAY MANAGEMENT SERVICES, INC.
5455 A1A SOUTH, SUITE 3
SAINT AUGUSTINE, FL 32080

New Mailing Address:

FEI Number: 20-0982692 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICES, INC.
5455 A1A SOUTH
SUITE 3
SAINT AUGUSTINE, FL 32080 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: P
Name: BENSON, RICK
Address: 5455 A1A SOUTH, SUITE 3
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VP
Name: LANDAU, NANCY
Address: 5455 A1A SOUTH, SUITE 3
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: S
Name: KUEPPER, DELINDA
Address: 5455 A1A SOUTH, SUITE 3
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: T
Name: BOYNTON, WANDA
Address: 5455 A1A SOUTH, SUITE 3
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D
Name: LAWSON, PAUL
Address: 5455 A1A SOUTH, SUITE 3
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: RICK BENSON

P

03/30/2011

Electronic Signature of Signing Officer or Director

Date