

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007428

FILED  
Apr 30, 2005  
Secretary of State

**Entity Name:** HAMMOCK OAKS ESTATES HOMEOWNERS ASSOCIATION, INC

**Current Principal Place of Business:**

40001 EMERALD COAST PARKWAY  
DESTIN, FL 32541 US

**New Principal Place of Business:**

**Current Mailing Address:**

40001 EMERALD COAST PARKWAY  
DESTIN, FL 32541 US

**New Mailing Address:**

FEI Number: 20-1822874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTHEWS, DANA C  
4475 LEGENDARY DRIVE  
DESTIN, FL FL 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 ( ) Delete  
Name: DEVARONA, ENRIQUE J  
Address: 405 EVANS STREET  
City-St-Zip: NICEVILLE, FL 32578 US

Title: VP/S ( ) Delete  
Name: ADKINSON, CHAD M  
Address: 90 SPIRES LANE UNIT 11A  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: VP/T ( ) Delete  
Name: ADKINSON, WAYNE  
Address: 20874 US HWY 331 SOUTH  
City-St-Zip: FREEPORT, FL 32439

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ENRIQUE J. DEVARONA

P

04/30/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date