

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008697

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** HAMMOCK FALLS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4107 BOGEY BLVD  
SEBRING, FL 33872

**New Principal Place of Business:**

**Current Mailing Address:**

4107 BOGEY BLVD  
SEBRING, FL 33872

**New Mailing Address:**

**FEI Number:** 20-1590306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LUDWIG, DONALD  
4107 BOGEY BLVD  
SEBRING, FL 33872 US

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

ABLES, CLIFFORD M III  
551 S. COMMERCE AVE.  
SEBRING, FL 33870 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: CLIFFORD M. ABLES, III

02/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ST  
Name: LUDWIG, DONALD  
Address: 4107 BOGEY BLVD  
City-St-Zip: SEBRING, FL 33872

Title: DP  
Name: CUNNINGHAM, PHILIP  
Address: 3029 LOST BALL DRIVE  
City-St-Zip: SEBRING, FL 33872

Title: DVP  
Name: SULT, ROGER  
Address: 4105 BOGEY BLVD  
City-St-Zip: SEBRING, FL 33872

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: PHILIP CUNNINGHAM

DP

02/06/2012

Electronic Signature of Signing Officer or Director

Date