2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007434

FILED Apr 14, 2009 Secretary of State

Entity Name: OAK HAMMOCK ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2090 WEST EAU GALLIE BLVD 2440 PIMLICO LANE SUITE A MELBOURNE, FL 32934

MELBOURNE, FL 32935

New Mailing Address: Current Mailing Address:

2090 WEST EAU GALLIE BLVD 2440 PIMLICO LANE MELBOURNE, FL 32934 SUITE A

MELBOURNE, FL 32935

FEI Number: 20-3985540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRANDON, THOMAS R NAZARENO, DARREN 2090 WEST EAU GALLIE BLVD 2440 PIMLIĆO LANE MELBOURNE, FL 32934 US SUITE A

MELBOURNE, FL 32935 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: DARREN NAZARENO 04/14/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SERGIS, STEVEN P MR HARNISH, DONNA Name: Name:

6233 HALYARD CT Address: 2610 CROOKED ANTLER DRIVE Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: MELBOURNE, FL 32934

Title: () Delete Title: (X) Change () Addition

BRANDON, THOMAS R Name: NAZARENO, DARREN Name: Address: 2090 WEST EAU GALLIE BLVD SUITE A Address: 2440 PIMLICO LANE City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32934

Title: () Delete Title: SEC (X) Change () Addition FAULKNER, TIM FAULKNER, TIM Name: Name:

Address: 741 REBAB AVE NE Address: 775 HUNTINGTON ST., NE City-St-Zip: PALM BAY, FL 32907 City-St-Zip: PALM BAY, FL 32907

Title: () Delete Title: **TRES** () Change (X) Addition

Name: Name: SERGIS, STEVEN Address: Address: 2575 PIMLICO LANE City-St-Zip: City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN SERGIS **TRES** 04/14/2009