

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000437

FILED
Jan 17, 2012
Secretary of State

Entity Name: HAMMOCK COMMUNITY CONSERVATION CORPORATION

Current Principal Place of Business:

5788 N. OCEANSHORE BLVD
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

5788 N. OCEANSHORE BLVD.
PALM COAST, FL 32137

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAMPE, CHERYL A
5788 N. OCEANSHORE BLVD.
PALM COAST, FL 32137 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: CARELLI, FRANK
Address: 10 COTTONWOOD TRAIL
City-St-Zip: PALM COAST, FL 32137

Title: VP
Name: ROMAINE, ABIGAIL
Address: 37 NANTUCKET DR.
City-St-Zip: PALM COAST, FL 32137

Title: S
Name: SWINDERMAN, TODD
Address: 54 OCEAN ST.
City-St-Zip: PALM COAST, FL 32137

Title: D
Name: MCCLEERY, CAROLE A
Address: 8 SYCAMORE TERRACE
City-St-Zip: PALM COAST, FL 32137

Title: T
Name: MAMPE, CHERYL A
Address: 5788 N. OCEANSHORE BLVD.
City-St-Zip: PALM COAST, FL 32137

Title: D
Name: NEMRAVA, ALMA
Address: 7 NANTUCKET DR.
City-St-Zip: PALM COAST, FL 32137

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: CHERYL A. MAMPE

TREA

01/17/2012

Electronic Signature of Signing Officer or Director

Date