

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06000001696

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** HAMMOCK TRAILS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

**New Mailing Address:**

**FEI Number:** 26-0193640

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LELAND MANAGEMENT  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 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:** REBECCA FURLOW

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** SANDERS, KYLE  
**Address:** 911 OUTER ROAD  
**City-St-Zip:** ORLANDO, FL 32814

**Title:** VP  
**Name:** OROSZ, STEVE  
**Address:** 911 OUTER ROAD  
**City-St-Zip:** ORLANDO, FL 32814

**Title:** S/T  
**Name:** OROSZ, MATT  
**Address:** 911 OUTER ROAD  
**City-St-Zip:** ORLANDO, FL 32814

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:** KYLE SANDERS

PD

03/01/2011

Electronic Signature of Signing Officer or Director

Date