

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000001939

FILED
Oct 08, 2009
Secretary of State

Entity Name: HAMMOCK EDUCATIONAL AND ENVIRONMENTAL COMMUNITY SERVICES ASSOCIATION INC.

Current Principal Place of Business:

4 OCEAN RIDGE BLVD. SOUTH
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

4 OCEAN RIDGE BLVD. SOUTH
PALM COAST, FL 32137

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

SOUTHMAYD, JEFFREY D
4 OCEAN RIDGE BOULEVARD SOUTH
PALM COAST, FL 32137 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: JEFFREY D SOUTHMAYD

10/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOUTHMAYD, JEFFREY S.
Address: 4 OCEAN RIDGE BLVD. SOUTH
City-St-Zip: PALM COAST, FL 32137

Title: DVT () Delete
Name: SOUTHMAYD, NANCY
Address: 4 OCEAN RIDGE BLVD. SOUTH
City-St-Zip: PALM COAST, FL 32137

Title: DPS () Delete
Name: SOUTHMAYD, JEFFREY D. JR.
Address: 4 OCEAN RIDGE BLVD. SOUTH
City-St-Zip: PALM COAST, FL 32137

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 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: JEFFREY D SOUTHMAYD

PRES

10/08/2009

Electronic Signature of Signing Officer or Director

Date