

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26579

FILED  
Apr 24, 2009  
Secretary of State

**Entity Name:** WEST HAMMOCK VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

12600 NW HARBOUR RIDGE BLVD  
PALM CITY, FL 34990 US

**New Principal Place of Business:**

12600 HARBOUR RIDGE BLVD  
PALM CITY, FL 34990 US

**Current Mailing Address:**

12600 NW HARBOUR RIDGE BLVD  
PALM CITY, FL 34990 US

**New Mailing Address:**

12600 HARBOUR RIDGE BLVD  
PALM CITY, FL 34990 US

**FEI Number:** 65-0056710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORNETT, JANE  
401 E OSCEOLA STREET, FIRST FLOOR  
STUART, FL 34994 US

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

CORNETT, JANE  
401 E OSCEOLA STREET  
STUART, FL 34994 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: \_\_\_\_\_

04/24/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: SHERMAN, EARL  
Address: 1493 SWEETBAY CIRCLE  
City-St-Zip: PALM CITY, FL 34990

Title: DS ( ) Delete  
Name: NAWROCKI, EUGENE M  
Address: 1465 SWEETBAY CIR  
City-St-Zip: PALM CITY, FL 34990

Title: DP ( ) Delete  
Name: MEANEY, GEORGE M  
Address: 1483 SWEETBAY CIR  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DT (X) Change ( ) Addition  
Name: SHERMAN, EARL  
Address: 1493 SWEETBAY CIRCLE  
City-St-Zip: PALM CITY, FL 34990 US

Title: DS (X) Change ( ) Addition  
Name: NAWROCKI, EUGENE M  
Address: 1465 SWEETBAY CIRCLE  
City-St-Zip: PALM CITY, FL 34990 US

Title: DP (X) Change ( ) Addition  
Name: MEANEY, GEORGE M  
Address: 1483 SWEETBAY CIRCLE  
City-St-Zip: PALM CITY, FL 34990 US

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: GEORGE MEANEY

DP

04/24/2009

Electronic Signature of Signing Officer or Director

Date