

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28272

FILED
Jan 18, 2010
Secretary of State

Entity Name: THE HAMMOCKS OF SUGARMILL WOODS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

10 BRYSONIA COURT S
HOMOSASSA, FL 34446 US

New Principal Place of Business:

10 BYRSONIMA COURT S
HOMOSASSA, FL 34446 US

Current Mailing Address:

PO BOX 1760
HOMOSASSA SPRINGS, FL 34447 US

New Mailing Address:

FEI Number: 65-0118916 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HADSELL, LEANNE
13 DOGWOOD DRIVE
HOMOSASSA, FL 34446 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: S
Name: WIONCEK, SANDRA
Address: 44 W BYRSONIMA LOOP
City-St-Zip: HOMOSASSA, FL 34446 US

Title: P
Name: LA VALLEE, PIERRE
Address: 39 BYRSONIMA LOOP W
City-St-Zip: HOMOSASSA, FL 34446 US

Title: V
Name: DULANEY, RICHARD
Address: 92 BYRSONIMA LOOP W
City-St-Zip: HOMOSASSA, FL 34446 US

Title: D
Name: GORDY, MEL
Address: 10 BYRSONIMA LOOP W
City-St-Zip: HOMOSASSA, FL 34446 US

Title: T
Name: WALSTON, MARILYN
Address: 45 BYRSONIMA LOOP W
City-St-Zip: HOMOSASSA, FL 34446 US

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: LEANNE HADSELL

AGEN

01/18/2010

Electronic Signature of Signing Officer or Director

Date