

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30763

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: HAMMOCK DUNES OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7 FLORIDA PARK DRIVE NORTH  
SUITE C  
PALM COAST, FL 32137 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 353338  
PALM COAST, FL 32135 US

**New Mailing Address:**

FEI Number: 59-2944529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANNON, FRED JR.  
SOUTHERN STATES MANAGEMENT GROUP INC  
7 FLORIDA PARK DRIVE NORTH SUITE C  
PALM COAST, FL 32137 US

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

ANNON, FRED JR.  
7 FLORIDA PARK DRIVE NORTH  
SUITE C  
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: FRED ANNON, JR.

04/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ECKERT, DAVID  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: P/D ( ) Delete  
Name: BAGNALL, GEORGE  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: VP ( ) Delete  
Name: JEBBIA, KELLI  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: S/D ( ) Delete  
Name: DIPERNA, COSMO  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: DT ( ) Delete  
Name: AIELLO, BRUCE  
Address: PO BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: D ( ) Delete  
Name: KROLICKI, JANET  
Address: PO BOX 353338  
City-St-Zip: PALM COAST, FL 32135

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: BAGNALL, GEORGE  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: SD (X) Change ( ) Addition  
Name: JEBBIA, KELLI F  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: VPD (X) Change ( ) Addition  
Name: DIPERNA, COSMO  
Address: POST OFFICE BOX 353338  
City-St-Zip: PALM COAST, FL 32135

Title: TD (X) Change ( ) Addition  
Name: AIELLO, BRUCE  
Address: PO BOX 353338  
City-St-Zip: PALM COAST, FL 32135

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: GEORGE BAGNALL

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date