

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31361

FILED
Apr 24, 2008
Secretary of State

Entity Name: HAMMOCK DUNES CLUB, INC.

Current Principal Place of Business:

30 AVENUE ROYALE
PALM COAST, FL 321373424 US

New Principal Place of Business:

Current Mailing Address:

30 AVENUE ROYALE
PALM COAST, FL 321373424 US

New Mailing Address:

FEI Number: 59-2939057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PD () Delete
Name: GRONBACHER, FRED
Address: 30 AVENUE ROYALE
City-St-Zip: PALM COAST, FL 32137

Title: VPD () Delete
Name: ABERNATHY, JERRY
Address: 30 AVENUE ROYALE
City-St-Zip: PALM COST, FL 32137

Title: SD () Delete
Name: HORNBOSTEL, JOHN
Address: 30 AVENUE ROYALE
City-St-Zip: PALM COAST, FL 32137

Title: TD () Delete
Name: DUNLEAVY, JOHN
Address: 30 AVENUE ROYALE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAMPENNI, THOMAS
Address: 30 AVENUE ROYALE
City-St-Zip: PALM COAST, FL 32137

Title: VPD (X) Change () Addition
Name: TAYLOR, JOSEPH
Address: 30 AVENUE ROYALE
City-St-Zip: PALM COST, FL 32137

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: JOHN HORNBOSTEL

SD

04/24/2008

Electronic Signature of Signing Officer or Director

Date