

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36191

FILED
Apr 25, 2006
Secretary of State

Entity Name: HAMLET HOMEOWNERS ASSOCIATION (BREVARD), INC.

Current Principal Place of Business:

PO BOX 360402
MELBOURNE, FL 32936402 US

New Principal Place of Business:

PO BOX 360402
MELBOURNE, FL 32936402 US

Current Mailing Address:

PO BOX 360402
MELBOURNE, FL 32936402 US

New Mailing Address:

PO BOX 360402
MELBOURNE, FL 32936402 US

FEI Number: 59-2996618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, KATHY
2232 HAMLET DR.
MELBOURNE, FL 32934 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: PALACIOS, FERNANDO M
Address: 2345 OPHELIA LANE
City-St-Zip: MELBOURNE, FL 32934

Title: T () Delete
Name: WILLIAMS, EDWARD R JR.
Address: 2232 HAMLET DRIVE
City-St-Zip: MELBOURNE, FL 32934

Title: S () Delete
Name: BLOUNT, ANNETTE
Address: 2350 OPHELIA LANE
City-St-Zip: MELBOURNE, FL 32834

Title: D () Delete
Name: SPALDING, BRENDA
Address: 2367 HAMLET DR.
City-St-Zip: MELBOURNE, FL 32934

Title: V () Delete
Name: MILLER, ROBERT
Address: 2299 HAMLET DR.
City-St-Zip: MELBOURNE, FL 32934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: RICE, SANDY
Address: 2315 POLONIUS LANE
City-St-Zip: MELBOURNE, FL 32834

Title: V (X) Change () Addition
Name: BARNES, DAVE
Address: 2243 HAMLET DR.
City-St-Zip: MELBOURNE, FL 32934

Title: D (X) Change () Addition
Name: MILLER, ROBERT
Address: 2299 HAMLET DR.
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD R WILLIAMS, JR.

T

04/25/2006

Electronic Signature of Signing Officer or Director

Date