## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N36431

FILED Jan 16, 2010 Secretary of State

Entity Name: THE HAMMOCK BEACH ESTATES HOME OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

50 ARMAND BEACH DRIVE 18 MAHOE DRIVE NORTH PALM COAST, FL 32137 PALM COAST, FL 32137

**Current Mailing Address: New Mailing Address:** 

PO BOX 350668 PALM COAST, FL 32135

FEI Number: 59-3139437 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ANDERSON, LARRY HAMBY, ROBERT 50 ARMAND BEACH DRIVE 25 COTTONWOOD TRAIL PALM COAST, FL 32137 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: ROBERT HAMBY 01/16/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

HAMBY, ROBERT Name: Address: PO BOX 350668 City-St-Zip: PALM COAST, FL 32135

Title: SD

Name: AMUSO, LAWERENCE Address: PO BOX 350668

City-St-Zip: PALM COAST, FL 32135

Title:

ROBINSON, STEVE Name: 18 MAHOE DRIVE NORTH Address: City-St-Zip: PALM COAST, FL 32137

Title:

HEALY, PETER Name: PO BOX 350668 Address: City-St-Zip: PALM COAST, FL 32135

VPD Title:

CLARKE, SARA Name: PO BOX 350668 Address: PALM COAST, FL 32135 City-St-Zip:

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: STEPHEN ROBINSON T 01/16/2010