

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41707

FILED  
Jan 29, 2011  
Secretary of State

**Entity Name:** HUMMINGBIRD HAMMOCK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

P & M PROPERTY MGMT  
14360 SOUTH TAMIAMI TR UNIT B  
FORT MYERS, FL 33912 US

**New Principal Place of Business:**

**Current Mailing Address:**

P & M PROPERTY MGMT  
14360 SOUTH TAMIAMI TR UNIT B  
FORT MYERS, FL 33912 US

**New Mailing Address:**

**FEI Number:** 65-0311980      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SAPP, PAUL  
14360 SOUTH TAMIAMI TR  
UNIT B  
FORT MYERS, FL 33912 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: DP  
Name: FOURNIER, EDWARD  
Address: 14360 SOUTH TAMIAMI TRAIL, UNIT B  
City-St-Zip: FORT MYERS, FL 33912

Title: DVP  
Name: COLEMAN, DEBBIE A  
Address: 14360 SOUTH TAMIAMI TRAIL, UNIT B  
City-St-Zip: FORT MYERS, FL 33912

Title: T/S  
Name: LUCKEY, ETHELDA  
Address: 14360 SOUTH TAMIAMI TRAIL, UNIT B  
City-St-Zip: FORT MYERS, FL 33912

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: ED FOURNIER

PRES

01/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date