

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48239

FILED
Apr 29, 2009
Secretary of State

Entity Name: GOLF HAMMOCK CLUB, INC.

Current Principal Place of Business:

2222 GOLF HAMMOCK ROAD
SEBRING, FL 33872 US

New Principal Place of Business:

Current Mailing Address:

2222 GOLF HAMMOCK RD.
SEBRING, FL 33872 US

New Mailing Address:

FEI Number: 59-3118983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SENIOR, THOMAS
2222 GOLF HAMMOCK DR
SEBRING, FL 33872 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: AKUS, BARBAARA
Address: 3201 PAR ROAD
City-St-Zip: SEBRING, FL 33872

Title: SD () Delete
Name: SENIOR, THOMAS
Address: 4315 DUFFER LOOP
City-St-Zip: SEBRING, FL 33872

Title: TD () Delete
Name: ARCHEY, SUSAN
Address: 3613 CORMORANT POINT DRIVE
City-St-Zip: SEBRING, FL 33872

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: THOMAS SENIOR

SD

04/29/2009

Electronic Signature of Signing Officer or Director

Date