## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N48878

FILED Jul 25, 2006 Secretary of State

Entity Name: THE HAMMOCKS OF OAK LANDING HOMEOWNERS CORPORATION

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

4756 SANDY RUN LANE

4847 MARSH HAMMOCK DRIVE EAST
JACKSONVILLE, FL 32224 US

JACKSONVILLE, FL 32224 US

Current Mailing Address: New Mailing Address:

4756 SANDY RUN LANE

JACKSONVILLE, FL 32224 US

4847 MARSH HAMOOCK DRIVE EAST
JACKSONVILLE, FL 32224 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LINDSTROM, LAURA

4756 SANDY RUN LANE

JACKSONVILLE, FL 32224 US

MENKE, CAROLYN

4847 MARSH HAMMOCK DRIVE EAST

JACKSONVILLE, FL 32224 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: CAROLYN MENKE 07/25/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: LEE, LISA Name: BEE, VAL

Address: 4839 MARSH HAMMOCK DR. E. Address: 4823 MARSH HAMMOCK DR. E. City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32224 US

Title: VPT ( ) Delete Title: VPT (X) Change ( ) Addition

Name: STEWART, SCOTT Name: LONG, JEFF

Address: 4706 MARSH HAMMOCK DR.W. Address: 4704 MARSH HAMMOCK DRIVE EAST City-St-Zip: JACKSONVILLE, FL 32224 US

Title: T ( ) Delete Title: T (X) Change ( ) Addition

Name: LINDSTROM, LAURA Name: MENKE, CAROLYN
Address: 4756 SANDY RUN LANE Address: 4847 MARSH HAMMOCK DRIVE EAS

Address: 4756 SANDY RUN LANE Address: 4847 MARSH HAMMOCK DRIVE EAST City-St-Zip: JACKSONVILLE, FL 32224 US

 $\label{eq:title:Title:ST} {\sf Title:ST} \qquad \qquad {\sf () Delete} \qquad \qquad {\sf Title:ST} \qquad \qquad {\sf (X) Change () Addition}$ 

Name: BAHLER, RICHARD Name: BERGH, JON

Address: 4531 MARSH HAMMOCK DR. E. Address: 4834 MARSH HAMMOCK DRIVE WEST City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32224 US

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: CAROLYN MENKE T 07/25/2006