

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000397

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** HAMMOCK POINTE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O WORLD OF HOMES  
2884 S. OSCEOLA AVENUE  
ORLANDO, FL 32806 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O WORLD OF HOMES  
2884 S. OSCEOLA AVENUE  
ORLANDO, FL 32806 US

**New Mailing Address:**

**FEI Number:** 59-3215223

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERDINANDSEN ENTERPRISES, INC.  
2884 S. OSCEOLA AVENUE  
ORLANDO, FL 32806 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  
Name: LUKSTEID, PETE  
Address: 2884 S. OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: D  
Name: STINE, KEVIN  
Address: 2884 S. OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: SD  
Name: HAYES, EDITH  
Address: 2884 S. OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: T  
Name: LIONE, HENRY  
Address: 2884 S. OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: V  
Name: MURRAY, MIKE  
Address: 2884 S. OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32806

Title: D  
Name: RIES, PETE  
Address: 2884 S. OSCEOLA AVENUE  
City-St-Zip: ORLANDO, FL 32806

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: EMMA DORAS

LCAM

01/05/2012

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

\_\_\_\_\_ Date