

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000311

FILED
Jan 06, 2009
Secretary of State

Entity Name: THE HAMMOCKS PROTECTIVE ASSOCIATION, INC.

Current Principal Place of Business:

4750 SATINWOOD TRAIL
COCONUT CREEK, FL 33063

New Principal Place of Business:

Current Mailing Address:

PO BOX 3689
BOYARS
GALVESTON, TX 77552 US

New Mailing Address:

PO BOX 934236
BOYARS
MARGATE, FL 33093-423 US

FEI Number: 65-0550030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYARS, EUGENE
1809 TAMARIND LANE
COCONUT CREEK, FL 33063 US

Name and Address of New Registered Agent:

BOYARS, EUGENE
1809 TAMARIND LANE
MARGATE, FL 33093 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:

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAHADEO, GARY
Address: 1921 NW 46TH DRIVE
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: SDV () Delete
Name: D'ADDARIO, LEONARD
Address: 1832 HAMMOCK BLVD.
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: TD () Delete
Name: BOYARS, EUGENE
Address: 1809 TAMARIND LANE
City-St-Zip: COCONUT CREEK, FL 33066 US

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: EUGENE BOYARS

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01/06/2009

Electronic Signature of Signing Officer or Director

Date