FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

N95000004669 (6)

OAK HAMMOCK ESTATES ASSOCIATION, INC.

| Principal Place of E | Business |
|----------------------|----------|
| | |

FILED May 20 1997 8:00am Secretary of State



| Solition April 4, etc. Sulfir April 4, etc. Sulfir April 4, etc | Principal Place | pal Place of Business Mailing Address | | | | r idainian ain laude durit datet datet abeit abeit abeit defit ditte beter beite beter beite beter beter dett | | | | | |
|--|----------------------------------|--|------------------------------|-------------------|-----------------|---|---------------------------------------|--|-------------|----------------------|------------------------|
| 2. Principal Place of Business 2a. Mailing Address 4. FEN hyriber 85-06 19002 | | | | | | | | | | | |
| Self-control of the provisions of Sections B17 0502 and 617 1003 Florida Statutus. He above-mand corporation's block of the obligations of Section B17 0502 and 617 0503. Florida Statutus. Poly of Section B17 0502 and 617 0503. Florida Statutus. Poly of Section B17 0502 and 617 0503. Florida Statutus. Poly of Section B17 0502 and 617 0503. Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 and 617 1003 Florida Statutus. Poly of Section B17 0502 Florida Statutus. Poly of Section B17 0503 Florida Statutus. Poly of Section B | | | | | | | | 3. Date Incorporated or Qualified 10/02/1995 | 3a. Dat | e of Last 05/28/1 | Report 996 |
| Solid, Agr. M. etc. 27 | 2. Principal Pl | lace of Business | 2a. Maili | ng Address | | | | 4. FEI Number | 4 | | |
| City & State | 21 | | | | | | ····· | 0070019002 | | | |
| City & State City & State | | #, etc. | | e, Apt. #, etc. | | | | 5. Certificate of Status Desired | | | |
| 28 Country Zip Z | | 9 | | & State | | | | 6 Election Campaign Financing | | | <u>'</u> |
| Zip Country Zip So So So So So So So S | 23 | | — <u>—</u> ′ | | | | | , | | | |
| PETERSON, DAVID E 200 CAPRI ISLES BLVD. VENICE FL 34292 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florids Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and maintain with, and eachypth to obligations of Sections 617 0502 and 617 1508, Florids Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and maintain with, and eachypth to obligations of Sections 617 0502 and 617 1508, Florids Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and the appointment as registered agent and maintain with, and eachypth to obligations of Sections 617 0503, Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME PETERSON, DAVID E 13. STATE ADDRESS 14. CHY-ST-2P 14. CHY-ST-2P 15. STATE ADDRESS 15. STREET ADDRESS 16. STATE ADDRESS 16. STREET | | Country | Zip | | Count | try | · · · · · · · · · · · · · · · · · · · | 8. This corporation has liability for it | ntangible (| ax under | s. 199.032, |
| PETERSON, DAVID E 200 CAPRI ISLES BLVD. VENICE FL 34292 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above and corporation submits this statement for the purpose of changing is registered dispert and familiar with, and accept the obligators of Section 617,0503, Florida Statutes, the above and corporation submits this statement for the purpose of changing is registered clinic or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered floridation of the provisions of Section 617,0503, Florida Statutes, the above accept the appointment as registered registered agent and familiar with, and accept the obligators of Section 617,0503, Florida Statutes, the above accept the appointment as registered office or registered agent and familiar with, and accept the obligators of Section 617,0503, Florida Statutes, the above accept the appointment as registered registered agent agent and familiar with, and accept the obligators of Section 617,0503, Florida Statutes, the above accept the appointment as registered registered agent and familiar with, and accept the obligators of Section 617,0503, Florida Statutes, the authorized by the corporation's board of directors. I hereby accept the appointment as registered registered agent and familiar with, and accept the obligators of Section 617,0503, Florida Statutes, the authorized by the corporation's board of directors. I hereby accept the appointment as registered registered agent and familiar with an accept the appointment as registered registered agent and familiar with accept the appointment as registered registered agent and familiar with accept the appointment as registered agent and familiar via the appointment as registered. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADD | 24 | | | | 30 | | | | | | |
| PETERSON, DAVID E 200 CAPR ISLES BLVD. ### City FL 85 Zip Code ### City FL 85 Z | | 9. Name and Address of Cu | rrent Registered | Agent | | <u>-</u> | Name - | 10. Name and Address of New Re | platered A | gent | |
| 200 CAPRI ISLES BLVD. VENICE FL 34292 11. Pursuant to the provisions of Sections 617:0502 and 617:1508. Florida Statutes. the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of, Section 617:0502, Prof. of 17:0502, Prof. of 1 | | | | | * | " ' | Name | | | | |
| VENICE FL 34292 | | | | | 8 | 2 | Street Addre | ess (P.O. Box Number is Not Acceptab | le) | | |
| ### City ### | | | | | 8 | 3 | ** | | | | |
| 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, type to proteil name of ingineed tages and time of approximate the obligations of, Section 617.0503, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. INTEL 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITION | VENICE | FL 34292 | | | | ᆚ | | | | | |
| 1.1 Pursuant to the provisions of Sections 617 0502 and 617.1509. Florida Statutes, the above-harmed corporation submits this statement for the purpose of changing its registered again. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. | | | | | 8 | 4 | City | | FI | 85 Zij | o Code |
| signaria marmaliani virile and accept the objection of Scale of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, and accept the objection of the provided after required when remaining) 12 | 11. Pursuant 1 | to the provisions of Sections 617 | .0502 and 617.15 | 08. Florida Statu | ites, the abo | 1-870 | named corp | oration submits this statement for the p | urnose of | changing | its registered |
| SIGNATURE Signature. Speed or printed name of legistered agoin and tille if applications 13. | office or re | egistered agent, or both, in the 8 | State of Florida, Su | ich change was | authorized I | by ti | he corporati | ion's board of directors. I hereby accep | t the appo | intment e | is registered |
| 12 OFFICERS AND DIRECTORS DELETE 1.1 TITLE PD DELETE 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.3 NAME 1.2 NAME 1.3 NAME | J | m raminar with, and accept the t | soligations of, seci | IION 017.0303, N | KONGA SIAIGI | .05. | | | | | ĺ |
| TITLE | SIGNATURE. | Signature, typed or printed name of register | ed agent and title if applic | cable. (NO | TE Registered A | gent | signature require | ed when reinstating) | DATE | | |
| NAME PETERSON, DAVID E 1.2 NAME 1.3 STREET ADDRESS NOKOMIS FL 34275 1.4 CITY -ST- 2P | 12. | OFFICERS | AND DIRECTOR | | 13. | | | ADDITIONS/CHANGES TO OFFIC | | | |
| STREET ADDRESS A01 SORRENTO RANCHES DR. 13 STREET ADDRESS 14 CITY-S1-ZIP | TITLE | · · · | | DELETE | 1.1 TITLE | E | | | | Change | Addition |
| City - St - Zip | NAME | | | | 1.2 NAM | IE | | | | | į |
| VD | STHEET ADDRESS | | es dr. | | 1.3 STRE | ET AL | DDRESS | | | | ĺ |
| NAME PETERSON, DAVID | | | *********** | LIDELETE | | | ZIP | | | Change | Addiso |
| STREET ADDRESS 1545 WATERFORD DR. 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | | ,,, | | - DECEIE | 1 | | | | | Unange | Addition . |
| City-St-ZiP VENICE FL 34292 2.4 City-St-ZiP Change Addition | | | | | | | | | | | ĺ |
| TITLE | | | | | | | | <i>y</i> | | | |
| NAME | | | | DELETE | | _ | -2112 | | | Change | Addition |
| STREET ADDRESS 1545 WATERFORD DR. 3.3 STREET ADDRESS | 1 | | 1 | | 1 | | | | | | |
| STREET ADDRESS CITY-ST-ZIP Change Addition | 1 | | - | | | | DORESS | | | | |
| TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition NAME 51 TITLE 51 TITLE Change Addition NAME 52 NAME CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 61 TITLE Change Addition NAME 62 NAME CITY-ST-ZIP CHANGE Addition STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CTTY-ST-ZIP | | | | | | | . , | | | | |
| A STREET ADDRESS CITY - ST - ZIP | | | | DELETE | | ******* | | | | Change | Addition |
| A CITY-ST-ZIP | NAME | | | | 4.2 NAM | ΝE | | | | | |
| TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME | STREET ADDRESS | | | | 4.3 STRE | EET AL | DORESS | | | | • |
| NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE □ DELETE 61 TITLE □ Change □ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP | CITY-ST-ZIP | | | | 4.4 City | - ST- | 21P | | | | |
| STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP | TITLE | | | ☐ DELETE | 5.1 TITLE | E | | | | L Change | : L Addition |
| CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP | NAME | | | | 52 NAM | Œ | | | | | |
| TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP | STREET ADDRESS | | | | 5.3 STRE | EEY AI | DDAESS | | | | |
| NAME 62 NAME STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP | | | | The server | | | - ZIP | | | - Observe | |
| STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | | | | ☐ DELETE | • | | | | | L Change | Addition |
| CITY-ST-ZIP 6.4 CITY-ST-ZIP |] | | | | 1 | | | | | | • |
| | | | | | | | | | | | |
| 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the | | by carlify that the information are | anlied with this file | na dose not aus | | | | t in Section 119 07/31/0 Florida Statuto | e i further | cartify th | at the |

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have 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 in Block 12 or Block 12 or Block 13 if changed, or on an attachment with an address.

Daylime Phone # 0064899