

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005921

FILED
Jan 30, 2006
Secretary of State

Entity Name: LAKE HAMMOCK VILLAGE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1300 US HIGHWAY 27 N
HAINES CITY, FL 33844 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1315
HAINES CITY, FL 33845 US

New Mailing Address:

26 SILVERCREST DRIVE
HAINES CITY, FL 33844 US

FEI Number: 59-3355494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STATON, LINDA
148 GLEN ESTE BLVD
HAINES CITY, FL 33844 US

Name and Address of New Registered Agent:

PALMER, GEORGE
162 GLEN ESTE CT.
HAINES CITY, FL 33844 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: GEORGE PALMER

01/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STATON, LINDA
Address: 148 GLEN ESTE BLVD
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: JOHNSON, DAVE
Address: 183 GLEN ESTE BLVE
City-St-Zip: HAINES CITY, FL 33844

Title: T () Delete
Name: HOUSER, SAM
Address: 74 SILVER CREST DR
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: PATELUNAS, WILLIAM R
Address: 174 GLEN ESTE BLVD
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: BLOSS, ROBERT
Address: 12 SILVER CREST DR.
City-St-Zip: HAINES CITY, FL 33844

Title: S () Delete
Name: FOX, JEAN
Address: 43 REINKE RD
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PALMER, GEORGE
Address: 162 GLEN ESTE CT.
City-St-Zip: HAINES CITY, FL 33844

Title: V.P. (X) Change () Addition
Name: REESE, ROBERT
Address: 50 SARGENT STREET
City-St-Zip: HAINES CITY, FL 33844

Title: TRES (X) Change () Addition
Name: EDELSTEIN, NOAH
Address: 94 REINEKE ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: SEC (X) Change () Addition
Name: BARBARA, PUND
Address: 93 REINEKE ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: D (X) Change () Addition
Name: RENEE, DEJANE
Address: 22 SILVER CREST DR.
City-St-Zip: HAINES CITY, FL 33844

Title: D (X) Change () Addition
Name: JUDY, DIXON
Address: 24 SILVERCREST DRIVE
City-St-Zip: HAINES CITY, FL 33844

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: ROBERT REESE

V.P.

01/30/2006

Electronic Signature of Signing Officer or Director

Date