

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003627

1. Entity Name

OAK HAMMOCK MOBILE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

2455 HIGHWAY 17 SOUTH LOT 60
BARTOW FL 33830

Mailing Address

2455 HIGHWAY 17 SOUTH LOT 60
BARTOW FL 33830

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3412485

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NORRIS, JACK
2455 HWY 17 SOUTH LOT 57
BARTOW FL 33830

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME NORRIS, JACK
STREET ADDRESS 2455 HIGHWAY 17 SOUTH, #57
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE PD
NAME NORRIS, JACK
STREET ADDRESS 2455 HWY 17 South #57
CITY-ST-ZIP BARTOW, FL ☐ Change ☐ Addition

TITLE VD
NAME HEMPSTEAD, GERALD
STREET ADDRESS 2455 HIGHWAY 17, #30
CITY-ST-ZIP BARTOW FL ☒ Delete

TITLE VD
NAME DILLS, ROGER
STREET ADDRESS 2455 HWY 17 South #92
CITY-ST-ZIP BARTOW, FL ☐ Change ☒ Addition

TITLE SD
NAME KENNEDY, MARY ANN
STREET ADDRESS 2455 HIGHWAY 17, #88
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE SD
NAME KENNEDY, MARY ANN
STREET ADDRESS 2455 HWY 17 South #88
CITY-ST-ZIP BARTOW, FL ☐ Change ☐ Addition

TITLE TD
NAME BEACH, BETTA
STREET ADDRESS 2455 HWY 17 S. #60
CITY-ST-ZIP BARTOW FL ☐ Delete

TITLE TD
NAME BEACH, BETTA
STREET ADDRESS 2455 HWY 17 South #60
CITY-ST-ZIP BARTOW, FL ☐ Change ☐ Addition

TITLE D
NAME ROWLES, JANET
STREET ADDRESS 2455 HIGHWAY 17, #60
CITY-ST-ZIP BARTOW FL 33830 ☐ Delete

TITLE D
NAME ROWLES, JANET
STREET ADDRESS 2455 HWY 17 South #91
CITY-ST-ZIP BARTOW, FL ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition

12. I 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 information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-02 863-533-2706

Date Daytime Phone #

CR2E037 (9/01)