2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2006 8:00 am Secretary of State

01-18-2006 90024 049 ****61.25

1. Entity Name HAMMOCK SHORES HOMEOWNERS ASSOCIATION INC.									v	บบบ	U L V -	•	
Principal Plac HAMMOCK CO EASTPOINT,	OVE ROAD	P.O. BO	Mailing Address P.O. BOX 378 EASTPOINT, FL 32328					_			. 	MARI SI 1881:	
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01142006	Chg-Ni	P	CR2E	(11/05)		
City & State			City & State				4. FEI Numbe 59-366	1004			→	oplied For ot Applicable	
Zip	Zip Country		Zip Co.		intry		5. Certificate of Status Desired \$8.75 Additional Fee Required					ditional d	
6. Name and Address of Current Registered Agent					Name		7. Name and	Address	of New I	Registere	d Agent		
DURHAM, JAMES T 9 HAMMOCK COVE ROAD							ddress (F	P.O. Box Numb	er is Not A	cceptab	le)		
EASTPOIN	IT, FL 32	328											
						City					F	L Zip Cod	le
	named entitions of regis	ty submits this statement for tered agent.	or the purpose	of changing its	register	ed office or	register	ed agent, or bo	th, in the S	tate of F	lorida. I a	m familiar with,	and accept
SIGNATURE	Signature, typed	d or printed name of registered agent	t and title if applica	ble. (NOTE	: Registere	d Agent signatur	re recuired	when reinstation)			DAT		
				· ·	•							·	
	_	ee is \$61.25 May 1, 2006		9. Election Can Trust Fund C	npaign F	inancing		\$5.00 May E Added to Fees		Flo	Make che rida Dep	ock payable to	tate
10.	Due by #		RECTORS	9. Election Can Trust Fund C	npaign F Contribut	inancing ion.		\$5.00 May B		Flo	Make che rida Dep	ock payable to artment of S	tate
10. TITLE NAME	PD PD	May 1, 2006 OFFICERS AND DI	RECTORS	9. Election Can	npaign F Contribut	inancing ion.	□ • A	\$5.00 May E Added to Fees	ANGES TO	Flo OFFIC	Make che rida Dep	ock payable to	tate
TITLE NAME STREET ADDRESS	PD DURHAM 9 HAMMO	OFFICERS AND DI 1, JAMES T OCK COVE RD	RECTORS	9. Election Can Trust Fund C	npaign F Contribut 11. TITL NAM STRI	E E E E E E E E E E E E E E E E E E E	D LLA1	\$5.00 May E Added to Fees DDITIONS/CH ZDI, JEI	ANGESTO FFIZE CR C	Flo OFFICI Y LOVE	Make cherida Dep	eck payable to artment of S DIRECTORS IN	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DURHAM 9 HAMMO EASTPOO	OFFICERS AND DI	RECTORS	9. Election Can Trust Fund C Delete	npaign F Contribut 11. TITL NAM STRI	E E E E E E E E E E E E E E E E E E E	D LLA1	\$5.00 May E Added to Fees	ANGESTO FFIZE CR C	Flo OFFICI Y LOVE	Make cherida Dep	DIRECTORS IN Change	tate 1 10 Addition
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12. I hereby certify that the information supplied with this tiling does not quality for the exemptions contained 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 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 accurate charged, or on accurate charged.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HJANO

850-670-5951