

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005478

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** HAMMOCK GREENS III AT PELICAN SOUND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

20820 HAMMOCK GREEN LANE  
ESTERO, FL 33928 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 9709  
NAPLES, FL 341019709 US

**New Mailing Address:**

**FEI Number:** 59-3473085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HART, STEPHEN P  
4985 TAMiami TRAIL EAST  
NAPLES, FL 34113 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DV ( ) Delete  
Name: SHANKS, EVALENE  
Address: 20820 HAMMOCK GREENS LANE # 203  
City-St-Zip: ESTERO, FL 33928 US

Title: DP ( ) Delete  
Name: JORDAN, PAT  
Address: 20820 HAMMOCK GREENS LANE #403  
City-St-Zip: ESTERO, FL 33928 US

Title: DST ( ) Delete  
Name: FILLENWORTH, LUCILLE  
Address: 20820 HAMMOCK GREENS LANE # 106  
City-St-Zip: ESTERO, FL 33928 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DST (X) Change ( ) Addition  
Name: JORDAN, PAT  
Address: 20820 HAMMOCK GREENS LANE #403  
City-St-Zip: ESTERO, FL 33928 US

Title: DP (X) Change ( ) Addition  
Name: FILLENWORTH, LUCILLE  
Address: 20820 HAMMOCK GREENS LANE # 106  
City-St-Zip: ESTERO, FL 33928 US

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: LUCILLE FILLENWORTH

PD

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date