

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005479

FILED
Apr 17, 2007
Secretary of State

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

Current Principal Place of Business:

20810 HAMMOCK GREEN LANE
ESTERO, FL 33928 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9709
NAPLES, FL 34101 US

New Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMiami TRAIL E.
NAPLES, FL 34113 US

FEI Number: 65-0809280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANCHARD, JOHN
1337 EGRETS LANDING #102
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: VD () Delete
Name: IBSEN, AL
Address: 20810 HAMMOCK GREENS LANE #304
City-St-Zip: ESTERO, FL 33928 US

Title: SD () Delete
Name: NOVARRO, CAROL
Address: 20810 HAMMOCK GRNS LN #101
City-St-Zip: ESTERO, FL 33928 US

Title: PTD () Delete
Name: SYRETT, JIM
Address: 20810 HAMMOCK GREENS LANE #301
City-St-Zip: ESTERO, FL 33928 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: NOVARRO, PENNY
Address: 20810 HAMMOCK GRNS LN #101
City-St-Zip: ESTERO, FL 33928 US

Title: PD (X) Change () Addition
Name: SYRETT, JIM
Address: 20810 HAMMOCK GREENS LANE #301
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: JIM SYRETT

PD

04/17/2007

Electronic Signature of Signing Officer or Director

Date