

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 03, 2006 8:00 am**  
**Secretary of State**

08-03-2006 90004 022 \*\*\*\*70.00

DOCUMENT # N98000002626

1. Entity Name

OAK HAMMOCK PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1349 ACORN CIRCLE  
APOPKA FL 32703  
US

1349 ACORN CIRCLE  
APOPKA FL 32703  
US



2. Principal Place of Business

3. Mailing Address

~~1349 Acorn Circle~~ 1331 Acorn Circle

~~1349 Acorn Circle~~ 1331 Acorn Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Apopka, FL

Apopka, FL

Zip

Country

Zip

Country

32703

USA

32703

USA

2nd MOORE

CR2E037 (4/06)

4. FEI Number

59-3520363

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

HOCKEY, GARY  
1349 ACORN CIRCLE  
APOPKA FL 32703

Name Kelli Martin

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

1331 Acorn Circle

Apopka

City

FL

Zip Code

32703

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. I am familiar with, and accept the obligations of registered agent.

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**  
**Due By September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOCKEY, GARY 1349 ACORN CIRCLE APOPKA FL 32703	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SMITH, JOEL 1249 ACORN CIRCLE APOPKA FL 32703	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LOGSDON, PATRICIA 1318 ACORN CIRCLE APOPKA FL 32703	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Joyce Nardelli <del>1349</del> 1231 Acorn Circle Apopka, FL 32703	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Patricia John 1230 Acorn Circle Apopka, FL 32703	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Kelli Martin 1331 Acorn Circle Apopka FL 32703	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Jesse Colon 1267 Acorn Circle Apopka, FL 32703	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Wendy Fryer 1219 Acorn Circle Apopka, FL 32703	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 an attachment with an address, with all other like empowered.

SIGNATURE

Kelli Martin

7/24/06

407-721-2851