## 2001 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

5550 15TH STREET EAST

## DOCUMENT # N9900001594

1. Entity Name

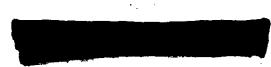
5550 15TH STREET EAST

## HAMMOCK PLACE II PROPERTY OWNERS ASSOCIATION, IN a



## May 17, 2001 8:00 am Secretary of State

05-17-2001 91338 047 \*\*\*\*61.25



BRADENTON FL			BRADENTON FL 34203									
P.O. BOX			P.O. BOX 2012	. 26%		1						
ONECO, FL 34264			ONECO, FL 34264									
2. Principal Place of Business			3. Mailing Address					_				
NO OFFICE-DEVELOPMENT			P.O. BOX 2012									
Suite, Apt. #, etc.			Suite, Apt. #, stc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State				4. FEI Numb	er 65-8964726		Ar	plied For	
			ONECO, FL			03 0904720				t Applicable		
Zip		Country	Zip 34264	Country MANATEI			5. Certificate of Status Desired					
	6. Name an	d Address of Current	Registered Agent		_Name _		7. Name and	Address of New F	legistered Ag	ent		
			and the second of the second o	Name			TBD					
ROKNICH, NICK				Ì	Street Ad	dress (f	(P.O. Box Number is Not Acceptable)					
	OND STREET	•		-								
SUITE 901	)	•		i								
SARASOTA FL 34236						· I			FL	FL Zip Code		
8. The above	named entity s	ubmits this statement for	r the purpose of changing its	registere	d office or	register	ed agent, or bo	th. in the state of Flo	orida.	·		
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SIGNATURE.	Slow duta tunnel or	printed name of registered agent	and title if anoticable (APOY)	E: Boolderer	Acent electric	re recuired	when reinstating)	<del></del>	DATE			
<del></del>	organica con construction of the construction	printed that to displace of agent						Einstein ann allian ann an		eren Test		
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FILE NOW: FEE IS \$61.25		Election Campaign Financia     Trust Fund Contribution.		- C +0.0.		O May Be I to Fees Department of			' . ·			
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NAME	HANEY, JAMES D		·	NAM			OLD CRAPO				Ì	
STREET ADDRESS	1	STREET EAST		•	ET ADDRESS		. BOX 20				}	
CITY-ST-ZIP	BRADENTO	N FL 34203			-ST-ZIP		CO, FL E PRESID	34264		<u> </u>	☐ Addition	
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ODRESS	}				ET ADDRESS						}	
311-51-219	Ĺ			CITY	-ST-ZIP							
2. I hereby a	certify that the in	nformation supplied wit	h this filing does not qualify fo	r the exe	motion sta	led in Se	ection 119 07/3	(i) Florida Statutes	. I further certi	fy 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.

Mary Lynn Dwight, VP