

2001 UNIFORM BUSINESS REPORT (UBR)

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

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

DOCUMENT # N99000001594

1. Entity Name

HAMMOCK PLACE II PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

5550 15TH STREET EAST
 BRADENTON FL 34203
 P.O. BOX 2012
 ONECO, FL 34264

Mailing Address

5550 15TH STREET EAST
 BRADENTON FL 34203
 P.O. BOX 2012
 ONECO, FL 34264

2. Principal Place of Business

NO OFFICE-DEVELOPMENT

3. Mailing Address

P.O. BOX 2012

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
 ONECO, FL

4. FEI Number

65-8964726

Applied For

Not Applicable

Zip

Country

Zip

Country

34264

MANATEE

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

ROKNICH, NICK
1800 SECOND STREET
SUITE 901
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name **TBD**

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

City

FL

Zip Code

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.

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**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

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

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HANEY, JAMES D 5550 15TH STREET EAST BRADENTON FL 34203	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HANEY, MICHAEL D 5550 15TH STREET EAST BRADENTON FL 34203	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HANEY, RANDY 5550 15TH STREET EAST BRADENTON FL 34203	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT HAROLD CRAPO P.O. BOX 2012 ONECO, FL 34264	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT MARY LYNN DWIGHT P.O. BOX 2012 ONECO, FL 34264	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER KELLY ADDEN P.O. BOX 2012 ONECO, FL 34264	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ANGELA COPELAND P.O. BOX 2012 ONECO, FL 34264	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Mary Lynn Dwight Mary Lynn Dwight, VP

4-16-01

941-951-7007

CR2E037 (10/00)