

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004647

FILED  
Feb 23, 2011  
Secretary of State

**Entity Name:** CHRISTINA HAMMOCK OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6520 LAKE CLARK DRIVE  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 5993  
LAKELAND, FL 33807

**New Mailing Address:**

**FEI Number:** 59-3599259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GROSS, JOHN  
671 LAKE CLARK PLACE  
LAKELAND, FL 33813 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: TREA  
Name: PENNINGTON, JAMES  
Address: 6730 LAKE CLARK DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: PD  
Name: GROSS, JOHN  
Address: 671 LAKE CLARK PLACE  
City-St-Zip: LAKELAND, FL 33813

Title: SD  
Name: SPEAKS, TOM  
Address: 6675 LAKE CLARK DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: VPD  
Name: DORSEY, HIGHTOWER  
Address: 6780 LAKE CLARK DRIVE  
City-St-Zip: LAKELAND, FL 33813

Title: VPD  
Name: DANNY, OURS  
Address: 6755 LAKE CLARK DRIVE  
City-St-Zip: LAKELAND, FL 33813

I hereby 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 all other like empowered.

SIGNATURE: JAMES PENNINGTON

TREA

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date