

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005523

FILED
Apr 08, 2007
Secretary of State

Entity Name: SOUND HAMMOCK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 6266
NAVARRE, FL 32566

New Principal Place of Business:

1747 SOUND HAMMOCK DRIVE
NAVARRE, FL 32566

Current Mailing Address:

P.O. BOX 6266
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 59-3605468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEITSCH, DINA
8285 NAVARRE PARKWAY
NAVARRE, FL 32566 US

Name and Address of New Registered Agent:

BLACKBURN, KEN
1726 TURKEY OAK DRIVE
NAVARRE, FL 32566 US

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: KEN BLACKBURN

04/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLACKBURN, KEN
Address: 1726 TURKEY OAK DR
City-St-Zip: NAVARRE, FL 32566

Title: VPD () Delete
Name: RUSSO, MARK
Address: 1783 SOUND HAMMOCK DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: SD () Delete
Name: BURDO, JEFF
Address: 1800 SOUND HAMMOCK DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: TD () Delete
Name: RENSEL, KIMBERLY
Address: 1701 TURKEY OAK DRIVE
City-St-Zip: GULF BREEZE, FL 32566

Title: DIR () Delete
Name: DAVID, ROBERT
Address: 7140 BLUE JACK DRIVE
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: GARBE, JEAN
Address: 1784 TURKEY OAK DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: SD (X) Change () Addition
Name: ELLERMAN, DEAN
Address: 7143 BLUE JACK DRIVE
City-St-Zip: NAVARRE, FL 32566

Title: DIR (X) Change () Addition
Name: RENSEL, KIMBERLY
Address: 1701 TURKEY OAK DRIVE
City-St-Zip: GULF BREEZE, FL 32566

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

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: KEN BLACKBURN

PD

04/08/2007

Electronic Signature of Signing Officer or Director

Date