

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007377

FILED
Apr 19, 2006
Secretary of State

Entity Name: OAK HAMMOCK II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

400 N.W. SECOND STREET
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

400 N.W. SECOND STREET
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 65-0977865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASSELS, JOHN D JR.
400 N.W. SECOND STREET
OKEECHOBEE, FL 34972 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: PD () Delete
Name: GOODBREAD, GEORGE A
Address: 12575 HIGHWAY 70 EAST
City-St-Zip: OKEECHOBEE, FL 34974

Title: VD () Delete
Name: GOODBREAD, MARK
Address: 1820 S.E. 7TH LANE
City-St-Zip: OKEECHOBEE, FL 34974

Title: STD () Delete
Name: ENRICO, ROBERT S
Address: 11525 HIGHWAY 710
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GOODBREAD, GEORGE A
Address: 12575 HIGHWAY 70 EAST
City-St-Zip: OKEECHOBEE, FL 34972

Title: VD (X) Change () Addition
Name: GOODBREAD, MARK
Address: 12575 HWY 70 E
City-St-Zip: OKEECHOBEE, FL 34972

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: GEORGE A GOODBREAD

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date