2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000012149

Entity Name: HAMMOCK COMMUNITIES, INC.

FILED Apr 22, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|

301 S CENTRAL AVE 267 OLD MOODY BLVD FLAGLER BEACH, FL 32136 PALM COAST, FL 32164

Current Mailing Address: New Mailing Address:

301 S CENTRAL AVE 267 OLD MOODY BLVD FLAGLER BEACH, FL 32136 PALM COAST, FL 32164

FEI Number: 59-3631714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CONNER, TIMOTHY J
2 JUNGLE HUT RD
411 S CENTRAL AVE
PALM COAST, FL 32137 US
FLAGLER BEACH, FL 32136 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: 04/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSVD () Delete Title: PSVD (X) Change () Addition Name: SMITH, RICH Name: SMITH, RICH

 Address:
 301 S CENTRAL AVE
 Address:
 267 OLD MOODY BLVD

 City-St-Zip:
 FLAGLER BEACH, FL 32136
 City-St-Zip:
 PALM COAST, FL 32164

Name:CONNER, TIMOTHY JName:CONNER, TIMOTHY JAddress:2 JUNGLE HUT RDAddress:411 S CENTRAL AVECity-St-Zip:PALM COAST, FL 32137City-St-Zip:FLAGLER BEACH, FL 32136

Title: VP (X) Delete Title: () Change () Addition

 Name:
 CASTANHEIRÂ, JOHN W
 Name:

 Address:
 301 S. CENTRAL AVE
 Address:

 City-St-Zip:
 FLAGLER BEACH, FL 32136
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICH SMITH PSVD 04/22/2009