FILED
Apr 21, 2003 8:00 am
Secretary of State
04-21-2003 91062 026 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

90099775

DOCUMENT # P01000028315

1. Entity Name
HAMMOCK PROPERTIES, INC.

Principal Place of Business	Mailing Address
1318 PONTE VEDRA BLVD PONTE VEDRA BEACH, FL 32082	1318 PONTE VEDRA BLVD PONTE VEDRA BEACH, FL 32082

2. Principal Place of Business		3. Mailing Address	
10672 Quail Ridge Dr.		10672	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Quail Ridge Dr.	
City & State: St. Augustine Fl.		City & State: St. Augustine Fl	
Zip: 32095	Country: St. Johns	Zip: 32095	Country: St. Johns

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-3737254 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH HULSEY & BUSEY
225 WATER STREET SUITE 1800
JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

Name

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. I am familiar with, and accept the obligations of registered agent.

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 $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PS FORISTER, WAYNE 10623 LEGENDS LANE AUSTIN, TX 78747	☒ Delete	Wayne Forister Pres, Dir, Sec 10672 Quail Ridge Dr. St. Augustine, Fl. 32095	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Trigg Forister - V. Pres, Tres., Dir 10623 Legends Lane	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	Austin, Tx 78747	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 607, 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: Wayne Forister 4-18-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #