

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757490

**Entity Name:** HAMMOCK OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11031 MONFERO STREET  
CORAL GABLES, FL 33156

**Current Mailing Address:**

11031 MONFERO STREET  
CORAL GABLES, FL 33156 US

**FEI Number:** 59-2110561

**Certificate of Status Desired:** No

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

FARADJI, EILEEN H. PRESIDENT  
11031 MONFERO STREET  
CORAL GABLES, FL 33156 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:** EILEEN H. FARADJI

03/06/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FARADJI, EILEEN H. DR.  
Address        11031 MONFERO STREET  
City-State-Zip: CORAL GABLES FL 33156

Title            VP  
Name            DONSKY, MAURICE  
Address        440 ROVINO AVENUE  
City-State-Zip: CORAL GABLES FL 33156

Title            VP  
Name            SECKINGER, DANIEL L. DR.  
Address        487 ROVINO AVENUE  
City-State-Zip: CORAL GABLES FL 33156

Title            TREASURER  
Name            SPOSATO, NANCY  
Address        444 ROVINO AVENUE  
City-State-Zip: CORAL GABLES FL 33156

Title            SECRETARY  
Name            DENIS, ROBERTO  
Address        430 ROVINO AVENUE  
City-State-Zip: CORAL GABLES FL 33156

Title            VP  
Name            WELLMAN, DENA  
Address        1184 MONFERO STREET  
City-State-Zip: CORAL GABLES FL 33156

Title            VP  
Name            MARINO, SAMIRA  
Address        11000 TANYA STREET  
City-State-Zip: CORAL GABLES FL 33156

Title            VP  
Name            POLANCO, LOURDES  
Address        11050 MARIN STREET  
City-State-Zip: CORAL GABLES FL 33156

*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:** ROBERTO R DENIS

**SECRETARY**

03/06/2022

Electronic Signature of Signing Officer/Director Detail

Date