

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758690

FILED
Mar 05, 2019
Secretary of State
9183510754CC**Entity Name:** THE HAMMOCKS OF NAPLES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5535 RATTLESNAKE HAMMOCK ROAD
NAPLES, FL 34113**Current Mailing Address:**5535 RATTLESNAKE HAMMOCK ROAD
NAPLES, FL 34113 US**FEI Number: 59-2378022****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SMITH, BRENDA
5535 RATTLESNAKE HAMMOCK RD
303
NAPLES, FL 34113 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TREASURER
Name	MCDERMOTT, STEVE
Address	5535 RTLSNK HMK RD # 203
City-State-Zip:	NAPLES FL 34113

Title	VP
Name	SCHOLZ, JEANNE
Address	5535 RATTLESNAKE HMK RD #103
City-State-Zip:	NAPLES FL 34113

Title	S
Name	SMITH, BRENDA
Address	5535 RATTLESNAKE HAMMOCK RD., 303
City-State-Zip:	NAPLES FL 34113

Title	PRESIDENT
Name	JANKE, STEPHANIE
Address	5535 RTLSNK HMK RD # 205
City-State-Zip:	NAPLES FL 34113

Title	DIRECTOR
Name	DASH, LAURIE
Address	5535 RATTLESNAKE ROAD, 304
City-State-Zip:	NAPLES FL 34113

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: STEPHANIE JANKE**PRESIDENT****03/05/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date