

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759494

Entity Name: DARK HAMMOCK ESTATES PROPERTY OWNERS
ASSOCIATION, INC.**Current Principal Place of Business:**3608 JUAN ORTIZ CIRCLE
FORT PIERCE, FL 34947**Current Mailing Address:**3608 JUAN ORTIZ CIRCLE
FORT PIERCE, FL 34947 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BROWN, HERBERT DARYL
3608 JUAN ORTIZ CIRCLE
FORT PIERCE, FL 34947 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:** HERBERT DARYL BROWN

01/21/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BROWN, HERBERT DARYL
Address 3608 JUAN ORTIZ CIRCLE
City-State-Zip: FORT PIERCE FL 34947

Title VP
Name JOHNSON, RUBIN
Address 3503 JUAN ORTIZ CIRCLE
City-State-Zip: FORT PIERCE FL 34947

Title SECRETARY
Name PARKS, CAROL
Address 3400 MENENDEZ AVE.
City-State-Zip: FORT PIERCE FL 34947

Title TREASURER
Name DECK, MARY
Address 3405 MENENDEZ AVE.
City-State-Zip: FORT PIERCE FL 34947

Title DIRECTOR
Name TOKES, BILLY
Address 3505 FONTANEDA AVENUE
City-State-Zip: FORT PIERCE FL 34947

Title DIRECTOR
Name DECK, MARY
Address 3405 MENENDEZ
City-State-Zip: FORT PIERCE FL 34947

Title DIRECTOR
Name PARK, KIRBY
Address 608 JUAN ORTIZ CIRCLE
City-State-Zip: FORT PIERCE FL 34947

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: HERBERT DARYL BROWN**PRESIDENT**

01/21/2021

Electronic Signature of Signing Officer/Director Detail

Date