

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004263

Entity Name: THE HAMMOCKS AT MINORCA OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**2600 NORTH PENNISULA DRIVE
NEW SMYRNA BCH, FL 32169**Current Mailing Address:**2600 NORTH PENNISULA DRIVE
NEW SMYRNA BCH, FL 32169**FEI Number: 14-1874302****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KARLA, BAUMANN
391 S. TIMBERLANE DRIVE
NEW SMYRNA BEACH, FL 32168 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, DIRECTOR
Name HARDAGE, JOE
Address 2600 NORTH PENNISULA DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title VP, DIRECTOR
Name BLAKE, PHIL
Address 2600 NORTH PENNISULA DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title SECRETARY, DIRECTOR
Name LAND, TED
Address 2600 NORTH PENNISULA DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title PRESIDENT, DIRECTOR
Name READER, GWEN
Address 2600 NORTH PENNISULA DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title DIRECTOR
Name SMOLINSKI, JAMES
Address 2600 NORTH PENINSULA DRIVE
City-State-Zip: NEW SMYRNA BEACH FL 32169

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: GWEN READER**PRESIDENT****01/16/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date