2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### Entity Name: PLANTATION HAMMOCK HOMEOWNER'S ASSOCIATION, INC.

# Current Principal Place of Business:

1880 S. 14TH ST., STE. 103 FERNANDINA BCH., FL 32034

# **Current Mailing Address:**

1880 S. 14TH ST., STE. 103 FERNANDINA BCH., FL 32034 US

# FEI Number: 47-5311249

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

GALPHIN, W.N. 1880 S. 14TH ST., STE. 103 FERNANDINA BCH., FL 32034 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

### **Officer/Director Detail :**

|  | Title           | TREASURER                        | Title           | PRESIDENT                     |
|--|-----------------|----------------------------------|-----------------|-------------------------------|
|  | Name            | BAGGETT, DAVID                   | Name            | MOCK, JONATHAN T              |
|  | Address         | 1880 S. 14TH STREET<br>SUITE 103 | Address         | 1880 S. 14TH ST.<br>SUITE 103 |
|  | City-State-Zip: | FERNANDINA BCH. FL 32034         | City-State-Zip: | FERNANDINA BCH. FL 32034      |
|  | Title           | SECRETARY                        |                 |                               |
|  | Name            | WEBB, NANCY                      |                 |                               |
|  | Address         | 1880 S. 14TH STREET<br>SUITE 103 |                 |                               |
|  | City-State-Zip: | FERNANDINA BCH. FL 32034         |                 |                               |
|  |                 |                                  |                 |                               |

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: JONATHAN MOCK

PRESIDENT

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 11, 2017 Secretary of State CC9415611568

Certificate of Status Desired: No

Date