

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31088

FILED
Apr 10, 2011
Secretary of State

Entity Name: HAMMOCK COVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

151 SAWGRASS CORNERS DRIVE
SUITE 204 G
PONTE VEDRA, FL 32082 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2055
PONTE VEDRA, FL 32004 US

New Mailing Address:

FEI Number: 59-3369523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EWING, JOHN T
151 SAWGRASS CORNERS DRIVE
SUITE 204 G
PONTE VEDRA, FL 32082 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: FALKENBERG, HERB
Address: 6527 BURNHAM CIR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S
Name: WESTWOOD, UTE
Address: 6506 BURNHAM CIR.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P
Name: KLINGMAN, GERALD
Address: 6519 BURNHAM CIR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T
Name: LAWLER, TOM
Address: 6512 BURNHAM CIR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP
Name: HANSGEN, DAVE
Address: 6533 BURNHAM CIR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: GERALD KLINGMAN

P

04/10/2011

Electronic Signature of Signing Officer or Director

Date