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Feb 25, 1999 8:00 am
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02-25-1999 90072 046 ****61.25

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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N96000003627

1. Corporation Name
OAK HAMMOCK MOBILE HOMEOWNERS' ASSOCIATION, INC.

* 1 1 8 9 6 3 9 0 0 7 2 . 4 6 3 *

Principal Place of Business Mailing Address
 2455 HIGHWAY 17 SOUTH #104 BARTOW FL 33830
 2455 HIGHWAY 17 SOUTH #104 BARTOW FL 33830



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		07/08/1996	
22 City & State		27 City & State		4. FEI Number	
23 Zip Country		28 Zip Country		59-3412485	
24		29		5. Certificate of Status Desired <input type="checkbox"/>	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
RESNICK, MICHAEL L 1342 E. VINE STREET SUITE 236 KISSIMMEE FL 34744				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORRIS, JACK	1.2 NAME	
STREET ADDRESS	2455 HIGHWAY 17 SOUTH, #57	1.3 STREET ADDRESS	
CITY-ST-ZIP	BARTOW FL	1.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCHULTZ, STEVE	2.2 NAME	FRANK NOARBURN
STREET ADDRESS	2455 HIGHWAY 17 SOUTH, #50	2.3 STREET ADDRESS	2455 HWY 17 SO # 45
CITY-ST-ZIP	BARTOW FL	2.4 CITY-ST-ZIP	BARTOW FL
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EDWARDS, JOANNE	3.2 NAME	BERNICE HITCHCOCK
STREET ADDRESS	2455 HIGHWAY 17 SOUTH #84	3.3 STREET ADDRESS	2455 HWY 17 SO # 46
CITY-ST-ZIP	BARTOW FL	3.4 CITY-ST-ZIP	BARTOW FL
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCARTHY, FRANK	4.2 NAME	
STREET ADDRESS	2355 HIGHWAY 17 SOUTH, #22	4.3 STREET ADDRESS	
CITY-ST-ZIP	BARTOW FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COSSABOOM, DON	5.2 NAME	BETTA BEACH
STREET ADDRESS	2455 HIGHWAY 17 SOUTH, #101	5.3 STREET ADDRESS	2455 HWY 17 S # 60
CITY-ST-ZIP	BARTOW FL	5.4 CITY-ST-ZIP	BARTOW FL
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *Betta Beach* 1-23-99

CR2E037 (1/198)