

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90170 034 ****61.25

DOCUMENT # N96000003627

1. Entity Name

OAK HAMMOCK MOBILE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**2455 HIGHWAY 17 SOUTH LOT 60
 BARTOW FL 33830**

**2455 HIGHWAY 17 SOUTH LOT 60
 BARTOW FL 33830**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3412485

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NORRIS, JACK
 2455 HWY 17 SOUTH LOT 57
 BARTOW FL 33830**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	NORRIS, JACK	2455 HIGHWAY 17 SOUTH, #57	BARTOW FL	<input type="checkbox"/>
VD	HEMPSTEAD, GERALD	2455 HIGHWAY 17, #30	BARTOW FL	<input checked="" type="checkbox"/>
SD	KENNEDY, MARY ANN	2455 HIGHWAY 17, #88	BARTOW FL	<input type="checkbox"/>
TD	BEACH, BETTA	2455 HWY 17 S. #60	BARTOW FL	<input type="checkbox"/>
D	ROWLES, JANET	2455 HIGHWAY 17, #60	BARTOW FL 33830	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	NORRIS, JACK	2455 HWY 17 South #57	BARTOW, FL	<input type="checkbox"/>	<input type="checkbox"/>
VD	DILLS, ROGER	2455 HWY 17 South #92	BARTOW, FL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	KENNEDY, MARY ANN	2455 HWY 17 South #88	BARTOW, FL	<input type="checkbox"/>	<input type="checkbox"/>
TD	BEACH, BETTA	2455 HWY 17 South #60	BARTOW, FL	<input type="checkbox"/>	<input type="checkbox"/>
D	ROWLES, JANET	2455 HWY 17 South #91	BARTOW, FL	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Betta Beach
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-02 863-533-2706
 Date Daytime Phone #

CR2E037 (9/01)

80049711



DO NOT WRITE IN THIS SPACE