

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007061

FILED
Jan 25, 2012
Secretary of State

Entity Name: OAK HAMMOCK AT THE UNIVERSITY OF FLORIDA, INC.

Current Principal Place of Business:

5100 SW 25TH BLVD
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5100 SW 25TH BLVD
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3562098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVEY, ANDREW J
5100 SW 25TH BLVD
GAINESVILLE, FL 32608 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: PD
Name: DORMAN, STEVE A
Address: 4928 NW 55TH STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: CEO
Name: FERGUSON, CATHERINE C
Address: 8168 ALDERMAN ROAD
City-St-Zip: MELROSE, FL 32666

Title: VPD
Name: O'NEIL, GERALD T SR.
Address: 519 SW 226 STREET
City-St-Zip: NEWBERRY, FL 32669

Title: D
Name: DEFORD, JAMES W
Address: 2831 NW 58TH BLVD
City-St-Zip: GAINESVILLE, FL 32606

Title: D
Name: BROWN, DONNA S
Address: 5931 NW 1ST PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: D
Name: GOFORTH, SAMUEL H
Address: 7820 NW 20TH LANE
City-St-Zip: GAINESVILLE, FL 32605

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: ANDREW J. DAVEY

CFO

01/25/2012

Electronic Signature of Signing Officer or Director

Date