

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14294

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** BAY HAMMOCK OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

10 FLAMINGO HAMMOCK RD  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1131  
ISLAMORADA, FL 33036

**New Mailing Address:**

FEI Number: 59-2720630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RYAN, CHRISTEL C  
10 FLAMINGO HAMMOCK ROAD  
ISLAMORADA, FL 33036 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: P  
Name: RYAN, DENNIS  
Address: 10 FLAMINGO HAMMOCK ROAD  
City-St-Zip: ISLAMORADA, FL 33036

Title: V  
Name: NESS, ERNIE  
Address: 82 CIDER HILL  
City-St-Zip: UPPER SADDLE RIVER, NJ 07458

Title: S  
Name: NESS, KAREN  
Address: 82 CIDER HILL  
City-St-Zip: UPPER SADDLE RIVER, NJ 07458

Title: T  
Name: RYAN, CHRISTEL C  
Address: 10 FLAMINGO HAMMOCK RD  
City-St-Zip: ISLAMORADA, FL 33036

Title: D  
Name: LESKO, BRIAN  
Address: 23 FLAMINGO HAMMOCK RD.  
City-St-Zip: ISLAMORADA, FL 33036

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: DENNIS RYAN

P

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date