

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 10, 2011
Secretary of State

DOCUMENT# N03000003823

Entity Name: HAMMOCK BAY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O CASTLE MANAGEMENT
12270 SW 3 ST #200
PLANTATION, FL 33325**New Principal Place of Business:****Current Mailing Address:**C/O CASTLE MANAGEMENT
PO BOX 559009
FORT LAUDERDALE, FL 33355**New Mailing Address:****FEI Number:** 27-0057931**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HASTINGS, VIVIEN N
24301 WALDEN CENTER DR
#300
BONITA SPRINGS, FL 34134 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: S
Name: RAINSVILLE, RICK
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134

Title: PD
Name: CALDWELL, DAVID
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP
Name: BOWLES, SCOTT
Address: 24301 WALDEN CENTER DR
City-St-Zip: BONITA SPRINGS, FL 34134

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: ROBERT A. DONNELLY

MGR

10/10/2011

Electronic Signature of Signing Officer or Director

Date