

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 14, 2007**  
**Secretary of State**

DOCUMENT# N04000011300

**Entity Name:** OAK HAMMOCK OF FT. LAUDERDALE HOMEOWNERS ASSN., INC.**Current Principal Place of Business:**523 SW 18TH AVENUE  
FORT LAUDERDALE, FL 33312**New Principal Place of Business:**7932 WILES ROAD  
CORAL SPRINGS, FL 33067**Current Mailing Address:**ONE FINANCIAL PLAZA  
SUITE 2001  
FORT LAUDERDALE, FL 33394**New Mailing Address:**7932 WILES ROAD  
CORAL SPRINGS, FL 33067**FEI Number:** 20-2491165**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BURGESS, DAVID  
C/O SENTINEL PROPERTY MGMT.  
ONE FINANCIAL PLAZA, SUITE 2001  
FORT LAUDERDALE, FL 33394 US**Name and Address of New Registered Agent:**BACKER LAW FIRM, PA  
400 SOUTH DIXIE HIGHWAY, SUITE 420  
BOCA RATON, FL 33432 US

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: KFB

11/14/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** BERG, GINNY  
**Address:** 523 SW 18TH AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33312**Title:** VPD ( ) Delete  
**Name:** FRAZIER, LYNN  
**Address:** 523 SW 18TH AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33312**Title:** STD ( ) Delete  
**Name:** BROWN, KONRAD  
**Address:** 523 SW 18TH AVENUE  
**City-St-Zip:** FORT LAUDERDALE, FL 33312**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KEITH F. BACKER, ESQ

RA

11/14/2007

Electronic Signature of Signing Officer or Director

Date