

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 08, 2010
Secretary of State

Entity Name: OAK HAMMOCK OF FT. LAUDERDALE HOMEOWNERS ASSN., INC.

Current Principal Place of Business:

7932 WILES ROAD
CORAL SPRINGS, FL 33067

New Principal Place of Business:

505 SW 18 AVENUE
FORT LAUDERDALE, FL 33312

Current Mailing Address:

P.O. BOX 23253
FORT LAUDERDALE, FL 33307

New Mailing Address:

FEI Number: 20-2491165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALANCY, STEVEN S
311 SE 13TH STREET
FORT LAUDERDALE, FL 33316 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: BERG, GINNY
Address: 505 SW 18TH AVENUE #12
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VPD
Name: WILLIAMS, NICHOLAS
Address: 535 SW 18 AVENUE #24
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SD
Name: GARCIA, TALIA
Address: 525 SW 18TH AVENUE, UNIT #22
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: T
Name: KARP, SCOTT
Address: 525 SW 18 AVENUE #23
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D
Name: URBANSKII, JOSHUA
Address: 505 SW. 18 AVENUE #08
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D
Name: BRYANT, RYANN
Address: 531 SW 18 AVENUE, #42
City-St-Zip: FORT LAUDERDALE, FL 33312

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: SCOTT KARP

TREA

04/08/2010

Electronic Signature of Signing Officer or Director

Date