2002 UNIFORM BUSINESS REPORT (UBR)

FILED 718539

02 SEP 12 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

39353

DOCUMENT # 718539

1. Entity Name

HAMPSHIRE HOUSE OF PORT CHARLOTTE -A CONDOMINIUM , INC.

Principal Place of Business	Mailing Address
CHARLOTTE SQUARE CONDOMINIUMS MANAGER'S OFFICE-2296 AARON ST. PORT CHARLOTTE FL 33952	CHARLOTTE SQUARE CONDOMINIUMS MANAGER'S OFFICE-2296 AARON ST. PORT CHARLOTTE FL 33952

DO NOT WRITE IN THIS SPACE
05-24-02 91371 003 $61.25

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1574993 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REED, CHESTER 21320 BRINSON AVENUE #220 PORT CHARLOTTE FL 33952	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Chester Reed 8/1/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

After September 13, 2002, min. will be $236.25.

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD REED, CHESTER A 21320 BRINSON AVENUE #220 PORT CHARLOTTE FL 33952	☐ Delete	D Reed, Chester	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD REID, GLEN 21320 BRINSON AVENUE # PORT CHARLOTTE FL 33952	☒ Delete	PD Taylor Bernard #101 21320 Brinson ave Port Charlotte FL 33952	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MACILVANE, RONALD 21320 BRINSON AVENUE # PORT CHARLOTTE FL 33952	☒ Delete	VD Galli, Dario 21320 Brinson #205 Port Charlotte, FL 33952	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LANIER, JEAN 21320 BRINSON AVENUE # PORT CHARLOTTE FL 33952	☒ Delete	TD Ryan, Jean 21320 Brinson ave #103 Port Charlotte, FL 33952	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D XXXXXXX, XXXXX 21320 BRINSON AVENUE # PORT CHARLOTTE FL 33952	☒ Delete	SD Gleason Janet 21320 Brinson ave # 114 Port Charlotte FL 33952	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D Cutts, Jeannette 21320 Brinson ave #102 Port Charlotte, FL 33952	☐ Change ☒ Addition

CR2E037 (4/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 8/1/02 (941)6296925
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #