FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

726631

(5)

HAMPTON COURT CONDOMINIUM, INC. Principal Place of Business Mailing Address 55 NEEDLE BLVD #89 490 N. HARBOR CITY BLVD. MERRITT ISLAND FL 32953-3368 MELBOURNE FL 32935-6858									
						3. Date incorporated or Qualified 06/07/1973		te of Last R 06/20/19	
2. Principal Place of Business 2a. Mailing Address 21						4. FEI Number 59-1559806	Applied For Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	е	City & State				6. Election Campaign Financing		\$5.00	May Be
23 Zip	Country	28 Zip	Cou	nto.		Trust Fund Contribution		Added	
24	25	29	30			8. This corporation has liability for in Florida Statutes		tax under s ☐ No	. 199.032,
	9. Name and Address of Currer	nt Registered Agent		Ĺ,		10. Name and Address of New Re	gistered .	Agent	
				81	Name	_			
underill, H. J. 111 490 N. Harbor City Byd.				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
MELBOURNE FL 32935				83					
				84	City		FL	85 Zip (Code
11. Pursuant office or ragent. La	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the oblig	92 and 617.1508, Florida Stati of Florida. Such change was ations of, Section 617.0503, F	utes, the at authorized Florida Stat	bove d by lutes	e-named corp the corpora s.	poration submits this statement for the p tion's board of directors. I hereby accep	ourpose of the app	changing it ointment as	is registered registered
	Signature, typed or printed name of registered ago			d Age	nt signature requi	red when reinstaling)	DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND		
TITLE	D DELETE			1.1 TITLE				Change	☐ Addition
NAME	DEAN, DONALD 600 MILFORD PT. RD.		1.2 N/		1000000				
STREET ADDRESS	MERRITT ISLAND FL		- 1		ADDRESS				
CłTY - ST - ZIP TITLE	D DELETE			1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition
NAME	LOMBARDO, VINCE								L. House
STREET ADDRESS	AS LICENSE BLUE HOT				ADDRESS				
CITY-ST-ZIP	MERRITT ISLAND FL		1		ST-ZIP	•			
TITLE	D DELETE			TLE	21-211			Change	Addition
NAME	FRANKLIN, PEGGEE			3.2 NAME					
STREET ADDRESS	55 NEEDLE BLVD. #78		3.3 ST	REET	ADDRESS				
CITY-ST-ZIP	MERRITT ISLAND FL				ST-ZIP				
TITLE	D	DELETE	4.1 Tr					Change	Addition
NAME	NATOWICH, SANDEE		4. 2 N	IAME					
STREET ADDRESS	55 NEEDLE BLVD., #57				ADDRESS				
CITY-ST-ZIP	MERRITT ISLAND FL		4.4 CI						
TITLE	D	DELETE	5.1 TI					Change	Addition
NAME	UNDERILL, H.J.		5.2 NA	AME					
STREET ADDRESS	490 N. HARBOR CITY BLVD.		•		ADDRESS				
CITY-ST-ZIP	MELBOURNE FL		5.4 CI						
TITLE .		☐ DELETE	6.1 TI		_ -::.			Change	Addition
NAME			6.2 N/	AME	ł				
STREET ADDRESS					ADDRESS				
			I						

14. I do 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 annual report or supplemental annual 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 porporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 Mchanged, or on an attachment with an address.

SIGNATURE:

AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Daytime Phone # 0019469

FILED

Jan 17 1997 8:00am

Secretary of State

1