

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 17, 2005 8:00 am**  
**Secretary of State**

06-17-2005 90004 018 \*\*\*\*61.25

<b>DOCUMENT # 765017</b> 1. Entity Name <b>HAMPTONS WEST CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>HAMPTONS WEST CONDO AVENTURA, FL 33180</b>			Mailing Address <b>20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>HIRSCH, ELLEN P BECKER AND POLIAKOF, EMERALD LAKE CORPORAT 3111 STIRLING RD. FT. LAUDERDALE, FL 33312-6525</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		<b>Make check payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>GREENBERG, SHEILA</b>		NAME	<b>Hildebrandt Sanford</b>	
STREET ADDRESS	<b>20281 E COUNTRY CLUB DR</b>		STREET ADDRESS	<b>20281 E. Country Club Dr</b>	
CITY - ST - ZIP	<b>AVENTURA, FL 33180</b>		CITY - ST - ZIP	<b>Aventura, FL 33180</b>	
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>ROGOVIN, LARRY</b>		NAME	<b>Fordin Sidney</b>	
STREET ADDRESS	<b>20281 E COUNTRY CLUB DR</b>		STREET ADDRESS	<b>20281 E. Country Club Dr</b>	
CITY - ST - ZIP	<b>AVENTURA, FL 33180</b>		CITY - ST - ZIP	<b>Aventura, FL 33180</b>	
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>SCHULTZ, MARTIH</b>		NAME		
STREET ADDRESS	<b>20281 E COUNTRY CLUB DR</b>		STREET ADDRESS		
CITY - ST - ZIP	<b>AVENTURA, FL 33180</b>		CITY - ST - ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>RIBACK, JUIETTE</b>		NAME		
STREET ADDRESS	<b>20281 E COUNTRY CLUB DR</b>		STREET ADDRESS		
CITY - ST - ZIP	<b>AVENTURA, FL 33180</b>		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>NEDBOR, NIKKI</b>		NAME		
STREET ADDRESS	<b>20281 E COUNTRY CLUB DR</b>		STREET ADDRESS		
CITY - ST - ZIP	<b>AVENTURA, FL 33180</b>		CITY - ST - ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>WIENER, LANCE</b>		NAME		
STREET ADDRESS	<b>20281 E COUNTRY CLUB DR</b>		STREET ADDRESS		
CITY - ST - ZIP	<b>AVENTURA, FL 33180</b>		CITY - ST - ZIP		
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.					
X SIGNATURE:			06/14/05 (36) 932-3210		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		