


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90028 022 ****61.25

DOCUMENT # 765017 1. Entity Name HAMPTONS WEST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 20281 E. COUNTRY DR AVENTURA, FL 33180			Mailing Address 20281 E. COUNTRY DR AVENTURA, FL 33180		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2469187	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOSEPH H. GANGUEZZA & ASSOCIATES, P.A. ONE S.E. THIRD AVE. STE. 2150 MIAMI, FL 33131			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MARKIS, FRANCIS 20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Joy May 20281 East Country Club Dr Apt 202 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WAGENBERG, SAUL 20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Stuart Weinberg 20281 East Country Club Dr Apt 203 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS RODRIGUEZ, MARCOS 20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Sidney Fordin 20281 East Country Club Dr Apt 102 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT YELON, ED 20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Harold Pearson 20281 East Country Club Dr # 1714 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANSON, STEVEN 20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Al Sacks 20281 East Country Club Dr # 2102 Aventura, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, BERLE 20281 EAST COUNTRY CLUB DRIVE AVENTURA, FL 33180	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Al Sacks 20281 East Country Club Dr # 2102 Aventura, FL 33180
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Edward Yelon</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

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