

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001485

FILED
Apr 10, 2009
Secretary of State

Entity Name: HAMPTON CREEK SUBDIVISION HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

PO BOX 13089
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 55-0901460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHINEHART, ROBERT S
644 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: C () Delete
Name: PARITTE, NICK
Address: 5570 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: VC () Delete
Name: LANGTON, RICHARD
Address: 5434 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: S () Delete
Name: HARRIS, JIM
Address: 5507 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Delete
Name: HOLLEY, MEGHAN
Address: 2546 HAMPTON MEADOW DR
City-St-Zip: TALLAHASSEE, FL 32311

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LAUW, NICO
Address: 5583 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: LANGTON, RICHARD
Address: 5434 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: HARRIS, JIM
Address: 5507 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D (X) Change () Addition
Name: MCGINNIS, ALLEN
Address: 5444 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

Title: D () Change (X) Addition
Name: FINE, MIKE
Address: 5576 HAMPTON HILL CIRCLE
City-St-Zip: TALLAHASSEE, FL 32311

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT S. RHINEHART

RA

04/10/2009

Electronic Signature of Signing Officer or Director

Date