

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90026 005 ****70.00

DOCUMENT # N17792

1. Entity Name

**THE HAMPTONS OF WOODFIELD COUNTRY CLUB
HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business

**21045 COMMERCIAL TRAIL
BOCA RATON FL 33486
US**

Mailing Address

**21045 COMMERCIAL TRAIL
BOCA RATON FL 33486
US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

65-0033370

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**WILLIAM K. ISAACSON,
21045 COMMERCIAL TRAIL
BOCA RATON FL 33486**

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature must be used when re-registering)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to:
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VP** ☒ Delete
NAME **COHEN, CHARLES**
STREET ADDRESS **5799 HAMILTON WAY**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **D** ☐ Delete
NAME **RUBENSTEIN, ALLAN**
STREET ADDRESS **3262 NW 59TH ST.**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **PD** ☐ Delete
NAME **ROBINS, DR STEHEN**
STREET ADDRESS **3100 HARRINGTON DR**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **D** ☒ Delete
NAME **DUOLAK, SCOTT MD**
STREET ADDRESS **3113 HARRINGTON WAY**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE **T** ☐ Delete
NAME **WEISS, DAVID**
STREET ADDRESS **5820 HARRINGTON WAY**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Reborah BARON**
STREET ADDRESS **5853 Harrington Way**
CITY-ST-ZIP **BOCA, FL 33496**

TITLE **VP** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature]

3/25/08