2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001335

FILED Apr 17, 2008 Secretary of State

Entity Name: THE HAMPTONS OF SARASOTA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2180 WEST SR 434 **SUITE 5000** LONGWOOD, FL 327795044 US **New Mailing Address: Current Mailing Address:** 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US FEI Number: 65-0880478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 - SUITE 5000 LONGWOOD, FL 32779 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete NIEDERECKER, NANCY NIEDERECKER, NANCY Name: Name: 5184 HIGHBURY CIRCLE Address: 5184 HIGHBURY CIRCLE Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34238 Title: () Delete Title: () Change () Addition ZAKI, EUGENIA Name: Name: Address: 5057 FLAGSTONE DRIVE Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: Title: () Delete Title: PD (X) Change () Addition BENNETT, JOHN VAN NESS, SCOTT Name: Name: Address: 5015 FLAGSTONE DR Address: 4990 GARDINERS BAY CIR City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34238 () Delete Title: TD Title: () Change () Addition Name: MERIC, J Name: 4909 BRIDGEHAMPTON BLVD Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: Title: () Delete Title: () Change () Addition GITOMER, GARY Name: Name: 6256 DONNINGTON CT Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: Title: () Delete Title: (X) Change () Addition KRAVITZ, JOE BARBECK, GARY Name: Name: Address: 5129 HIGHBURY CIR Address: 5220 HIGHBURY CIR SARASOTA, FL 34238 SARASOTA, FL 34238 City-St-Zip: City-St-Zip:

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: SCOTT VAN NESS PD 04/17/2008