

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90321 025 ****61.25

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1. Entity Name
 SOUTHAMPTON NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business
 10034 W. MCNAB ROAD
 TAMARAC, FL 33321

Mailing Address
 10034 W. MCNAB ROAD
 TAMARAC, FL 33321

40063526



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01222007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
 65-0857339

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

BROUGH, CHADROW & LEVINE, P.A.
 1900 NORTH COMMERCE PKWY
 WESTON, FL 33326

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 required when reinstating)

DATE

Filing Fee is \$61.25 Due by May 1, 2007

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME BANK, GEORGE Delete
 STREET ADDRESS 10034 MCNAB RD
 CITY-ST-ZIP TAMARAC, FL 33321

TITLE TD
 NAME ~~GEORGE BANK~~ GEORGE Change Addition
 STREET ADDRESS 10034 W MCNAB Rd.
 CITY-ST-ZIP TAMARAC, FL 33321

TITLE VD
 NAME MANDELIP, ARNOLD Delete
 STREET ADDRESS 10034 W. MCNAB RD
 CITY-ST-ZIP TAMARAC, FL 33321

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE SD
 NAME ZIMBLER, ANEL Delete
 STREET ADDRESS 10034 W. MCNAB RD
 CITY-ST-ZIP TAMARAC, FL 33321

TITLE PD
 NAME ZIMBLER, ANEL Change Addition
 STREET ADDRESS 10034 W MCNAB Rd.
 CITY-ST-ZIP TAMARAC, FL 33321

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #