

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 727571

**Entity Name:** HAMPSHIRE HOUSE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

320 W. LAKEVIEW ST.  
ORLANDO, FL 32804

**Current Mailing Address:**

P.O. BOX 720395  
ORLANDO, FL 32872 US

**FEI Number:** 59-1504001

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KAY, GLORIA  
320 LAKEVIEW STREET  
#112A  
ORLANDO, FL 32804 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

**Officer/Director Detail :**

Title PD  
Name BUTLER, TIM  
Address 320 LAKEVIEW ST #203  
City-State-Zip: ORLANDO FL 32804

Title SD  
Name KAY, GLORIA  
Address 320 LAKEVIEW ST #112A  
City-State-Zip: ORLANDO FL 32804

Title VPD  
Name DECARLO, DENNAE  
Address 1213 YALE STREET  
City-State-Zip: ORLANDO FL 32804

Title D  
Name PIETY, HARVEY  
Address 437 FAYE STREET  
City-State-Zip: APOPKA FL 32712

*I hereby 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 all other like empowered.*

**SIGNATURE:** TIM BUTLER

**PRESIDENT**

**02/18/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date