### 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. 04/30/2014

PD

#### SIGNATURE: MICHELLE LAMPERT

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent
SIGNATURE:
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, it
TAMPA FL 33609 US
S550 W EXECUTIVE DR SUITE 250

Name and Address of Current Registered Agent:

4131 GUNN HWY TAMPA, FL 33618

# **Current Mailing Address:**

DOCUMENT# N0100005219

**Current Principal Place of Business:** 

4131 GUNN HWY **TAMPA FL 33618** 

# FEI Number: 04-3679207

FRISCIA FRANCIS F

# 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: WEST HAMPTON HOMEOWNERS' ASSOCIATION, INC.

# Apr 30, 2014 Secretary of State CC6657546793

Date

FILED

Certificate of Status Desired: No

in the State of Florida.

#### **Officer/Director Detail :**

Title	D/SECRETARY	Title	PD		
Name	WELCH, SCOTT	Name	LAMPERT, MICHELLE		
Address	4131 GUNN HWY	Address	4131 GUNN HWY		
City-State-Zip:	TAMPA FL 33618	City-State-Zip:	TAMPA FL 33618		
Title		Title			
ritte	VP	Title	D/TREASURER		
Name	VP BLACKWELDER, BETH	Name	BARRINGTON, MINNIS		
Name	BLACKWELDER, BETH	Name	BARRINGTON, MINNIS		

Date