#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003784

Entity Name: THE HISTORIC HAMPTON HOUSE COMMUNITY TRUST, INC.

FILED Feb 11, 2017 Secretary of State CC0808480479

# **Current Principal Place of Business:**

4240 NW 27TH AVENUE MIAMI, FL 33142

# **Current Mailing Address:**

4240 NW 27TH AVENUE MIAMI, FL 33142 US

FEI Number: 30-0120658 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

PINKNEY, ENID C DR. 4990 NW 31ST AVENUE MIAMI, FL 33142 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: ENID C. PINKNEY 02/11/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title CHAIRMAN Title SECRETARY

Name ROBINSON, EDWARD G DR. Name JOHNSON, JUANITA

Address 1265 NW 91ST STREET Address 20225 N.E. HIGHLAND LAKES BLVD.

City-State-Zip: MIAMI FL 33147 City-State-Zip: MIAMI FL 33179-2815

Title TREASURER/BOARD MEMBER Title BOARD MEMBER

Name FORD, PHILLIP Name STRACHAN, RICHARD DR.

Address 17337 N.W. 7TH AVENUE Address 8841 NW 14TH AVENUE

City-State-Zip: MIAMI GARDENS FL 33169 City-State-Zip: MIAMI FL 33147

TitlePRESIDENTTitleVICE CHAIRMANNamePINKNEY, ENID C DR.NameROSETE, ISABELLAAddress4990 NW 31ST AVENUEAddress2835 N.W. 50TH STREET

City-State-Zip: MIAMI FL 33142 City-State-Zip: MIAMI FL 33142

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: DR. ENID C. PINKNEY

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 02/11/2017