

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006487

**FILED**  
**Apr 26, 2021**  
**Secretary of State**  
**9904503709CC**

**Entity Name:** HAMPTON LAKES OF DAVENPORT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809

**Current Mailing Address:**

6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 US

**FEI Number: 59-3553685**

**Certificate of Status Desired: No**

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

LELAND MANAGEMENT INC  
6972 LAKE GLORIA BLVD  
ORLANDO, FL 32809 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           PRESIDENT  
Name           SCHNUERER, MARY  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           TREASURER  
Name           COBB, KEVIN  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           DIRECTOR  
Name           FORD, TIMOTHY  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           DIRECTOR  
Name           HEMENWAY, LACEY  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           DIRECTOR  
Name           BROWN, LARRY B  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           SECRETARY  
Name           HAYES, JOHN  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title           VP  
Name           SCOTT, SHARON  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

*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: MARY SCHNUERER**

**PRESIDENT**

**04/26/2021**

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

\_\_\_\_\_  
Date