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Feb 03 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 703687 (4)

1. Corporation Name

HAMPTON HOUSE, INC.

Principal Place of Business

2311 N E 36TH ST
LIGHTHOUSE PNT FL 33064

Mailing Address

2311 N E 36TH ST
LIGHTHOUSE PNT FL 33064-7578



3. Date Incorporated or Qualified
03/08/1962

3a. Date of Last Report
03/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

59-2446610

Applied For

Not Applicable

5. Certificate of Status Desired

NO \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

NO \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALKER, MASON
2311 NE 36TH ST
LIGHTHOUSE POINT FL 33064

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DVT
NAME WALKER, MASON
STREET ADDRESS 2311 NE 36TH ST #2-A
CITY-ST-ZIP LIGHTHOUSE PT, FL 00000

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

TITLE DP
NAME ANDERSON, EDGAR T
STREET ADDRESS 2311 NE 36 ST #1C
CITY-ST-ZIP LIGHTHOUSE POINT-FL

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

TITLE DS
NAME FORRESTER, ANNE M
STREET ADDRESS 2311 NE 36 ST #2-E
CITY-ST-ZIP LIGHTHOUSE POINT FL

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

TITLE DS
NAME ANDERSON, HELEN
STREET ADDRESS 2311 NE 36TH STREET #1C
CITY-ST-ZIP LIGHTHOUSE PT FL

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME SHERWOOD, ROBERT
STREET ADDRESS 2311 NE 36TH ST. #1-E
CITY-ST-ZIP LIGHTHOUSE PT FL

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/97

4/L

Daytime Phone # 0021999

CR2E037 (9/96)