2007 NOT-FOR-PROFIT CORPORATION

FILED Mar 12, 2007 8:00 am Secretary of State 03-12-2007 90367 019 ****61.25

ANNUAL REPORT	
DOCUMENT # 705349	6
1. Entity Name THE HAMPTON HOMEOWNERS' ASSOCIATION, INC.	

		occircion, inc.					
Principal Plac 650 PAULA / MERRITT ISL		Mailing Address 650 PAULA AVENUE MERRITT ISLAND, FL 32	953-6119 US	40034		11 BIOLE OEURI OLONI	II 216 11101 DI 1001
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03042007 _C	hg-NP (CR2E037 (12/0	6)
City & State		City & State		4. FEI Number 59-244034	12		Applied For Not Applicab
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	☐ \$8.75 Fee Req	Additional ulred
	6. Name and Address of Current F	Registered Agent		7. Name and Add	ress of New Regi	stered Agent	
34: (515) (51			Name				
MUNDHENK, J F 650 PAULA AVENUE MERRITT ISLAND, FL 32953-6119		Street Ad	ddress (P.O. Box Number is	Not Acceptable)			
			City			FL Zip (Code
	named entity submits this statement for ions of registered agent.	the purpose of changing its re	gistered office or	registered agent, or both, in	the State of Florida	a. I am familiar v	vith, and acce
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SIGNATURE	Signature, typed or printed name of registered agent a	and title it applicable. (NOTE: F	Registered Agent signatu	ure required when reinstating)		DATE	
							
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees		e check payab Department o	
10.	-	Trust Fund Co	ntribution.	Added to Fees	Florida	Department o	f State
10.	Due by May 1, 2007	Trust Fund Co	ntribution.	Added to Fees ADDITIONS/CHANG	Florida	Department of AND DIRECTOR	of State S IN 10
'TITLE	Due by May 1, 2007 OFFICERS AND DIR	Trust Fund Co	ntribution.	Added to Fees ADDITIONS/CHANG PD	Florida	Department o	of State S IN 10
	Due by May 1, 2007 OFFICERS AND DIR	Trust Fund Co	ntribution.	Added to Fees ADDITIONS/CHANG PD HUNTER, RANDY	Florida ES TO OFFICERS	Department of AND DIRECTOR	of State S IN 10
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 i changed, or on an attachment with an address, with all other like empowered.

On oll