

FILE NOW: FILING FEE IS \$61.25

FILED
Jun 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra P. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # * 758 731

THE HAMPTONS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1820 Kings Lake Blvd. Naples, FL 33962	Mailing Address C/o Gulf Coast Property Mgmt. 9240 Bonita Beach Rd., #2217 Bonita Springs, FL 33923
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2. Principal Place of Business 21 1820 Kings Lake Blvd.	2a. Mailing Address 26 C/o Gulf Coast Property Mgmt. 9240 Bonita Beach Rd., #2217 Naples, FL
Suite, Apt. #, etc. 22 Naples, FL	Suite, Apt. #, etc. 27 Naples, FL
23 34112	28 34135
Country USA	Country USA

3. Date Incorporated or Qualified 06-11-1981	3a. Date of Last Report
4. FEI Number 59-2190396	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent Bill Mayton 9240 Bonita Beach Rd. Suite 2217 Bonita Springs, FL 33923		10. Name and Address of New Registered Agent 81 Name Paul L. Sapp 82 Street Address (P.O. Box Number is Not Acceptable) 9240 Bonita Beach Rd. 83 Suite 2217 84 City Bonita Springs FL 85 Zip Code 34135	
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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 *Paul L. Sapp* **Paul L. Sapp** DATE **6-10-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	P/D Farley, Douglas	1.2 NAME	
STREET ADDRESS	1806 Kings Lake Blvd., #101	1.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34112	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	VP/D Winkler, Robert	2.2 NAME	
STREET ADDRESS	1828 Kings Lake Blvd., #203	2.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34112	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	T/D Burghard, Fred	3.2 NAME	
STREET ADDRESS	1806 Kings Lake Blvd., #201	3.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34112	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	S/D Guerrero, Richard	4.2 NAME	
STREET ADDRESS	1814 Kings Lake Blvd., #202	4.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34112	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	D Ashman, Kenneth	5.2 NAME	
STREET ADDRESS	1816 Kings Lake Blvd., #201	5.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34112	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	D Green, Theodore	6.2 NAME	
STREET ADDRESS	1814 Kings Lake Blvd., #104	6.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 34112	6.4 CITY-ST-ZIP	

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: *Douglas Farley* **Douglas Farley** DATE **6-10-97** DAY/PHONE **941-775-9878**

CR2E037 (9/96)