

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758731

FILED
Mar 09, 2007
Secretary of State

Entity Name: THE HAMPTONS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-2190396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MANAGEMENT CORP
1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: OAR, WILLIAM
Address: 1814 KINGS LAKE BLVD #103
City-St-Zip: NAPLES, FL 34112

Title: PD () Delete
Name: BIRD, KATE
Address: 1828 KING'S LAKE BLVD.
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: POPE, ARTHUR
Address: 1806 KINGS LAKE BLVD #202
City-St-Zip: NAPLES, FL 34112

Title: SD () Delete
Name: YEAGLE, M CAROLYN
Address: 1798 KINGS LSKE BLVD #204
City-St-Zip: NAPLES, FL 34112

Title: T () Delete
Name: FORDE, EILEEN
Address: 1810 KING'S LAKE BLVD., #105
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: POPE, ARTHUR
Address: 1806 KINGS LAKE BLVD #202
City-St-Zip: NAPLES, FL 34112

Title: D (X) Change () Addition
Name: YEAGLE, M CAROLYN
Address: 1798 KINGS LSKE BLVD #204
City-St-Zip: NAPLES, FL 34112

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATE BIRD

P

03/09/2007

Electronic Signature of Signing Officer or Director

Date