

**2007 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2007**

**FILED**  
**Mar 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # B95000000304**

1. Entity Name  
**HAMPTON HILLS LIMITED PARTNERSHIP**



Principal Place of Business  
**20 TRAFALGAR SQUARE, SUITE 602  
NASHUA, NH 03063**

Mailing Address  
**2476 N. ESSEX AVE.  
HERNANDO, FL 34442**



03142007 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**02-0479604**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**ABEL, ERIC D ESQ  
2476 N ESSEX AVE  
HERNANDO, FL 34442**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2007, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **F95000003585**  
NAME **HERNANDO PROPERTIES, INC.**  
STREET ADDRESS **20 TRAFALGAR SQ., SUITE 601**  
CITY-ST-ZIP **NASHUA, NH 03063**

DOCUMENT # **G01155900122**  
NAME **FIVE N ASSOCIATES**  
STREET ADDRESS **40 TEMPLE STREET**  
CITY-ST-ZIP **NASHUA, NH 03060**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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U00000679263  
04/03/07-80030-024 500.00

**DO NOT WRITE  
IN THIS SPACE**

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**Stephen A. Tamposi**

**3/23/07**

Date

**352-746-6060**

Daytime Phone #

STAPLE CHECK HERE