2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

DOCUMENT # B95000000304

1. Entity Name

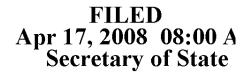
HAMPTON HILLS LIMITED PARTNERSHIP



Principal Place of Business

20 TRAFALGAR SQUARE, SUITE 602 NASHUA, NH 03063 Mailing Address

2476 N. ESSEX AVE. HERNANDO, FL 34442





DO NOT WRITE IN THIS SPACE

04102008 No Chg-LP

CR2E003 (12/06)

4. FEI Number			Applied For
02-0479604			Not Applicable
5. Certificate of Status Desired	П	\$8.75	Additional

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.	
	A.V.P. a.a.	

FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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		
NAME STREET CITY-S	ADDRESS	F9500003585 HERNANDO PROPERTIES, INC. 20 TRAFALGAR SQ., SUITE 601 NASHUA, NH 03063		
DOCUM NAME STREET CITY-S	ADDRESS	G01155900122 FIVE N ASSOCIATES 40 TEMPLE STREET NASHUA, NH 03060		
DOCUM NAME • STREET CITY-S	ADDRESS	•		
DOCUM NAME STREET CITY-S	ADDRESS			
DOCUM NAME - STREET CITY-ST	ADDRESS			
DOCUM NAME STREET CITY-ST	ADDRESS			

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

U00000904894 05/01/08-80031-009 500.00

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 accurrate 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:

Steph A Clu

4/10/0

352-746-6060

Daytime Phone #