


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000122877 1. Entity Name HAMPTON GROUP, LLC	
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Principal Place of Business 7300 S.W. 93RD AVE., SUITE 210 MIAMI, FL 33173	Mailing Address 7300 S.W. 93RD AVE., SUITE 210 MIAMI, FL 33173
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 04-3837644	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GIL, AUGUSTO J
 7300 S.W. 93RD AVE., SUITE 210
 MIAMI, FL 33173

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GIL AT TAMPA, INC. 7300 S.W. 93RD AVE., SUITE 210 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALMEIDA AT TAMPA, INC. 7374 S.W. 93RD AVE., SUITE 201 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CAMEJO AT TAMPA, INC. 9240 SUNSET DRIVE, SUITE 240 MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/16/07-90037-010 50.00

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Augusto J. Gil 1/12/07 (305) 598-4002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #