

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N00000000632**

1. Entity Name

**HAMPTON PARK LAKESIDE TOWNHOMES HOMEOWNERS ASSOC****FILED**  
**Mar 30, 2001 8:00 am**  
**Secretary of State**

03-30-2001 90338 041 \*\*\*\*61.25

0090972

Principal Place of Business

2180 W. SR 434  
SUITE 5000  
LONGWOOD FL 32779-5044

Mailing Address

2180 W. SR 434  
SUITE 5000  
LONGWOOD FL 32779-5044

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

4. FEI Number

59-3627604

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 STE 5000  
LONGWOOD FL 32779

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**9. Election Campaign Financing  
☐ Trust Fund Contribution.**\$5.00** May Be  
Added to Fees**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
D DUNCAN, JUDITH L 555 WINDERLEY PLACE, SUITE 420 MAITLAND FL 32751	<input type="checkbox"/> Delete	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D O'SULLIVAN, CHARLIE 555 WINDERLEY PLACE, SUITE 420 MAITLAND FL 32751	<input checked="" type="checkbox"/> Delete	PD LEIFERMAN, JIM 555 WINDERLEY PL STE 420 MAITLAND FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D ROSSER, STEVE 555 WINDERLEY PLACE, SUITE 420 MAITLAND FL 32751	<input checked="" type="checkbox"/> Delete	VD COOK, CHARLES 555 WINDERLEY PLACE STE 420 MAITLAND FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (10/00)