


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000004572		
1. Entity Name NHDC HAMPTON COURT APARTMENTS, INC.		

Principal Place of Business 3701 ST JOHNS AVENUE PALATKA, FL 32177	Mailing Address 10681 FOOTHILL BLVD SUITE 220 RANCHO CUCAMONGA, CA 91730
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2. Principal Place of Business 4415 N.W. 23rd Terrace Suite, Apt. #, etc.	3. Mailing Address 9065 Haven Avenue, Ste #100 Attn: Teri Tobin Suite, Apt. #, etc.
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City & State Gainesville, FL	City & State Rancho Cucamonga, CA
Zip 32653	Zip 91730
Country USA	Country USA

FILED
06 MAY 15 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04202006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-3728332	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CORZATT, JAMES, M 10681 FOOTHILL BLVD SUITE 220 RANCHO CUCAMONGA, CA 91730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDD BURUM, JEFFREY S 10681 FOOTHILL BLVD SUITE 220 RANCHO CUCAMONGA, CA 91730 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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:  4-26-06 909-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #