

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007688

FILED
Feb 26, 2009
Secretary of State

Entity Name: HAMPTON ISLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O LANDMARK MANAGEMENT SERVICES
1941 NW 150 AVE
HOLLYWOOD, FL 33028

New Principal Place of Business:

Current Mailing Address:

C/O LANDMARK MANAGEMENT SERVICES
1941 NW 150 AVE
HOLLYWOOD, FL 33028

New Mailing Address:

FEI Number: 20-0048443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD - SUITE C-207
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARNOLD, KERRY
Address: 714 SW 107
City-St-Zip: PEMBROKE PINES, FL 33025

Title: T () Delete
Name: MCDONALD, CHRIS
Address: 658 SW 106 AVE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: S () Delete
Name: DOMIQUEZ, REY
Address: 629 SW 7 AVE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: JACKMAN, GARFIELD
Address: 629 SW 7 AVE
City-St-Zip: PEMBROKE PINES, FL 33025

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HENNEN, KERRI
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: S (X) Change () Addition
Name: MCDONALD, CHRIS
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T (X) Change () Addition
Name: CROSBY, DANIEL
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D (X) Change () Addition
Name: KOCIS, CRAIG
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Change (X) Addition
Name: BENEDUCCI, ROSA
Address: 1941 NW 150TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KERRI HENNEN

PRES

02/26/2009

Electronic Signature of Signing Officer or Director

Date