

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 14, 2005 8:00 am**  
**Secretary of State**

03-14-2005 90091 022 \*\*\*\*61.25

**20020628**



<b>DOCUMENT # N04000001346</b> 1. Entity Name HAMPTON HILLS COMMUNITY ASSOCIATION, INC.			
Principal Place of Business 8198 JOG ROAD, SUITE 200 BOYNTON BEACH, FL 33437		Mailing Address 8198 JOG ROAD, SUITE 200 BOYNTON BEACH, FL 33437	
2. Principal Place of Business 7100 W CAMINO REAL Suite, Apt. #, etc. SUITE 117 City & State BOCA RATON, FL Zip 33433 Country USA		3. Mailing Address 7100 W CAMINO REAL Suite, Apt. #, etc. SUITE 117 City & State BOCA RATON, FL Zip 33433 Country USA	
4. FEI Number 01052005 Chg-NP		CR2E037 (10/03) <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CENTEX HOMES 8198 JOG ROAD, SUITE 200 BOYNTON BEACH, FL 33437		7. Name and Address of New Registered Agent Name VALYO, PAUL Street Address (P.O. Box Number is Not Acceptable) 7100 W CAMINO REAL Suite SUITE 117 City BOCA RATON FL Zip Code 33433	
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: <i>Paul Valyo</i> Paul Valyo 01/19/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BIRNBAUM, LEWIS <input type="checkbox"/> Delete 8198 JOG ROAD, SUITE 200 BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NISENBAUM, MICHAEL <input type="checkbox"/> Delete 8198 JOG ROAD, SUITE 200 BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAULSEN, CANDICE <input checked="" type="checkbox"/> Delete 8198 JOG ROAD, SUITE 200 BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MICHAEL REYNOLDS DST <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 8198 JOG ROAD STE 200 BOYNTON BEACH FL 33414
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
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
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 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: <i>Michael Reynolds</i> Michael Reynolds 02/10/05 561-362-7444 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			