

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED

FILED

07/15/07 10:59 RT

STATE
FLORIDA



03292007 Chg-NP CR2E037 (12/06)

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| DOCUMENT # N04000001346 | |
| 1. Entity Name HAMPTON HILLS COMMUNITY ASSOCIATION, INC. | |

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| Principal Place of Business 7100 W CAMINO REAL STE 117 BOCA RATON, FL 33433 | Mailing Address 7100 W CAMINO REAL STE 117 BOCA RATON, FL 33433 |
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| 2. Principal Place of Business - No P.O. Box # 951 BROKEN SOUND PKWY | 3. Mailing Address 951 BROKEN SOUND PKWY |
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| Suite, Apt. #, etc. SUITE 108 | Suite, Apt. #, etc. SUITE 108 |
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| City & State BOCA RATON, FL | City & State BOCA RATON, FL |
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| Zip 33487 | Country USA | Zip 33487 | Country USA |
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| 4. FEI Number 51-0546548 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent VALYO, PAUL 7100 W CAMINO REAL STE 117 BOCA RATON, FL 33433 | 7. Name and Address of New Registered Agent Name PAUL VALYO Street Address (P.O. Box Number is Not Acceptable) 951 BROKEN SOUND PARKWAY SUITE 108 City BOCA RATON FL Zip Code 33487 |
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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 <i>Paul Valyo</i> Paul Valyo 03/31/07 <small>(NOTE: Registered Agent signature required when reinstating)</small> |
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| Amended AR is \$61.25 | 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 | PD BIRNBRAUM, LEWIS 3301 QUANTUM BLVD. BOYNTON BEACH, FL 33426 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | JEREMY RURY 3301 QUANTUM BLVD BOYNTON BEACH FL 33426 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VD HILDEBRANDT, STEVEN 3301 QUANTUM BLVD. BOYNTON BEACH, FL 33426 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | STEVE RABBY 3301 QUANTUM BLVD BOYNTON BEACH FL 33426 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DST REYNOLDS, MIKE 3301 QUANTUM BLVD. BOYNTON BCH, FL 33426 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | 200103611502 05/31/07--01033--015 **\$61.25 |
| 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 |

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| 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: <i>Mike Reynolds</i> Mike Reynolds 03/31/07 561-241-5995 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> |
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