## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008186

FILED Apr 06, 2007 Secretary of State

Entity Name: HAMPTON VILLAGE AT RIVER RIDGE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

11324 RIDGE ROAD 5901 US 19 N

NEW PORT RICHEY, FL 34654 STE 7Q NEW PORT RICHEY, FL 34652

Current Mailing Address: New Mailing Address:

11324 RIDGE ROAD 5901 US 19 N

NEW PORT RICHEY, FL 34654 STE 7Q

NEW PORT RICHEY, FL 34652

FEI Number: 20-1547598 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TANKEL, ROBERT L QUALIFIED PROPERTY MANAGEMENT, INC

1022 MAIN ST. 5901 US 19 N SUITE D STE 7Q

DUNEDIN, FL 34698 US NEW PORT RICHEY, FL 34652 US

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

in the State of Florida.

SIGNATURE: MARY A WHITE 04/06/2007

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 BOYCE, MICHAEL D
 Name:
 BOYCE, MICHAEL D

 Address:
 11324 RIDGE ROAD
 Address:
 5901 US 19 N, STE 7Q

City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

 Name:
 REYNOLDS, B J
 Name:
 REYNOLDS, B J

 Address:
 11324 RIDGE ROAD
 Address:
 5901 US 19 N, STE 7Q

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:
 NEW PORT RICHEY, FL 34652

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 WILLIAMSON, DONA J
 Name:
 BOYCE, BRYAN

 Address:
 11324 RIDGE ROAD
 Address:
 5901 US 19 N, STE 7Q

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:
 NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY A WHITE CEO 04/06/2007