2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N06000004028

Entity Name: HAMPTON PROFESSIONAL CENTER CONDOMINIUM NO.1 ASSOCIATION, INC.

Current Principal Place of Business:

17905 NW 15TH STREET
PEMBROKE PINES, FL 330293136

New Principal Place of Business:

Current Mailing Address:

17905 NW 15TH STREET
PEMBROKE PINES, FL 330293136

New Mailing Address:

FEI Number: 20-4704264 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MINNAUGH, VICKI A
17905 N.W. 15TH STREET
PEMBROKE PINES, FL 330293136 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: PRES ( ) Delete
Name: MINNAUGH, VICKI A
Address: 17905 N.W. 15TH STREET
City-St-Zip: PEMBROKE PINES, FL 330293136

Title: V ( ) Delete
Name: JORGE, GONZALEZ E
Address: 1961 N.W. 150TH AVENUE, SUITE 202
City-St-Zip: PEMBROKE PINES, FL 33028

Title: S ( ) Delete
Name: GEORGE, OCHOA
Address: 1961 N.W. 150TH AVENUE, SUITE 201
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T ( ) Delete
Name: EDWARD, SANTOS J
Address: 17901 N.W. 15TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: VICKI A. MINNAUGH PRES 03/20/2009

Electronic Signature of Signing Officer or Director — Date