


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90167 006 ****61.25

DOCUMENT # N06400	
1. Entity Name THE EATON AT HAMPTONS WEST CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business PHOENIX MANAGEMENT STE E 250 FORT LAUDERDALE, FL 33319 US	Mailing Address 4780 N. STATE RD 7 STE E 250 FORT LAUDERDALE, FL 33319 US
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2. Principal Place of Business - No P.O. Box # Phoenix Management Suite, Apt. #, etc. 4780 N. State Rd 7 F-105	3. Mailing Address 4800 N. State Rd 7 Suite, Apt. #, etc. F-105
City & State Lauderdale Lakes, FL	City & State Lauderdale Lakes, FL
Zip 33319	Country USA

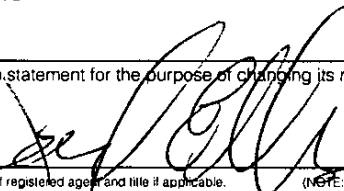


04102007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2516766	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 PHOENIX MANAGEMENT SERVICE 4780 N. STATE RD 7 STE E 250 FORT LAUDERDALE, FL 33319	7. Name and Address of New Registered Agent Name Phoenix Management Service Street Address (P.O. Box Number is Not Acceptable) 4800 N. State Rd 7 # F-105 City Lauderdale Lakes FL Zip Code 33319
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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  Pres. DATE **4/10/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	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	TD HONNAKEN, CARL 8040 HAMPTONS BLVD NORTH LAUDERDALE, FL 33068 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT rick ellis 8040 HAMPTONS BLVD NORTH LAUDERDALE, FL 33068 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STEFIN, ANNA 8040 HAMPTON BLVD N LAUDERDALE, FL 33068 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Evelyn Pearlman 8040 HAMPTONS BLVD North Lauderdale, FL 33068 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JAYNE, CHUCK 8040 HAMPTON BLVD NORTH LAUDERDALE, FL 33068 <input checked="" 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	rick ellis Pres 8040 Hampton Blvd N Lauderdale FL 33068 <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 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:  Pres. DATE **4/10/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #