2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FEI Number Applied For ()

DOCUMENT# N07000001979

Current Principal Place of Business:

Name and Address of Current Registered Agent:

12610 RACE TRACK ROAD

Current Mailing Address:

12610 RACE TRACK ROAD

TAMPA, FL 33626

TAMPA, FL 33626

FEI Number: 65-1307762

PUZZITIELLO, ROSS

FILED Apr 24, 2008 Secretary of State

Certificate of Status Desired ()

Entity Name: HAMPTON LAKES PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

12610 RACE TRACK ROAD
TAMPA, FL 33626 US

MELROSÉ-SOVEREIGN COMPANIES
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34685 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.

SIGNATURE: JACK B HANSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

NIERLICH, JOHN

TAMPA, FL 33626

12610 RACE TRACK ROAD

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name and Address of New Registered Agent:

New Principal Place of Business:

3527 PALM HARBOR BLVD.

PALM HARBOR, FL 34683

3527 PALM HARBOR BLVD

PALM HARBOR, FL 34683

New Mailing Address:

FEI Number Not Applicable ()

HANSON, JACK B

DPT () Delete () Change () Addition PUZZITIELLO, JR., RICHARD A Name: Name: 12610 RACE TRACK ROAD Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip: Title: DS () Delete Title: (X) Change () Addition DST PUZZITIELLO, ROSS Name: PUZZITIELLO, ROSS Name: Address: 12610 RACE TRACK ROAD Address: 12610 RACE TRACK ROAD City-St-Zip: TAMPA, FL 33626 City-St-Zip: TAMPA, FL 33626 Title: DVP () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROSS A PUZZITIELLO DP 04/24/2008