

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10180

FILED
Mar 29, 2009
Secretary of State

Entity Name: HAMPTON POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 809
FLORAL CITY, FL 34436 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 809
FLORAL CITY, FL 34436 US

New Mailing Address:

FEI Number: 59-2893027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEUTSCHMAN, ALFRED L
217 N. APOPKA AVE.
INVERNESS, FL 34452 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: D () Delete
Name: DAVIS, JIM
Address: 515 S POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: T () Delete
Name: MANGINI, LOUIS
Address: 5109 S POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: D () Delete
Name: SISOLAK, DICK
Address: 9200 E HAMPTON
City-St-Zip: INVERNESS, FL 34450

Title: D () Delete
Name: DEUTSCHMAN, ALFRED
Address: 5136 S. POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: S () Delete
Name: OLAFSON, DEE
Address: 5140 S. POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: D () Delete
Name: MISSFIT, DONALD
Address: 5148 S. POINTE DR.
City-St-Zip: INVERNESS, FL 34450

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T/S (X) Change () Addition
Name: DAVIS, KAREN
Address: 5151 S POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: DAVIS, JIM
Address: 5151 S POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: SISOLAK, DICK
Address: 9200 E HAMPTON POINT ROAD
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: DEUTSCHMAN, ALFRED
Address: 5136 S. POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: BONEY, LARRY
Address: 5135 S. POINTE DR.
City-St-Zip: INVERNESS, FL 34450

Title: D (X) Change () Addition
Name: MISSETT, DONALD
Address: 5148 S. POINTE DR.
City-St-Zip: INVERNESS, FL 34450

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: KAREN DAVIS

T/S

03/29/2009

Electronic Signature of Signing Officer or Director

Date