2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2011
Secretary of State

DOCUMENT# N10180

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:

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

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: T/S
Name: DAVIS, KAREN
Address: 5151 S POINTE DR.
City-St-Zip: INVERNESS, FL 34450

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

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: KAREN E. DAVIS T/S 03/06/2011
Electronic Signature of Signing Officer or Director Date