

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 04, 2008  
Secretary of State

DOCUMENT# N11919

Entity Name: HAMPTON LAKES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15817 HAMPTON VILLAGE DR  
TAMPA, FL 33618 US

**New Principal Place of Business:**

**Current Mailing Address:**

15817 HAMPTON VILLAGE DR  
TAMPA, FL 33618 US

**New Mailing Address:**

FEI Number: 59-3005480      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

RONALD, SANTIAGO  
15820 HAMPTON VILLAGE DR  
TAMPA, FL 33618 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: P ( ) Delete  
Name: ANGELAKOS, THEO  
Address: 15817 HAMPTON VILLAGE DR  
City-St-Zip: TAMPA, FL 33618

Title: VPT ( ) Delete  
Name: KEENE, JOHN  
Address: 15817 HAMPTON VILLAGE DR  
City-St-Zip: TAMPA, FL 33618

Title: TRES ( ) Delete  
Name: LIZA, ANGELAKOS  
Address: 15817 HAMPTON VILLAGE DR  
City-St-Zip: TAMPA, FL 33618

Title: OD ( ) Delete  
Name: SANTIAGO, RONALD  
Address: 15820 HAMPTON VILLAGE DR  
City-St-Zip: TAMPA, FL 33618

**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: THEO ANGELAKOS

P

05/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date