2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**



Apr 21, 2003 8:00 am Secretary of State

Applied For Not Applicable

\$8.75 Additional Fee Required

24 ****61.25

FILED

DOCUMENT	#	N 1	1	9.	19
1 Entity Name				_	

1. Entity Name HAMPTON LAKES HOMEOWNERS ASS	OCIATION, INC.		04-21-2003 90410	024 ****61
Principal Place of Business 15813 HAMPTON VILLAGE DRIVE TAMPA FL 33618 US	Mailing Address 15813 HAMPTON VILLAGE DRIVE TAMPA FL 33618 US			
2. Principal Place of Business 15846 Glenary Dr. Suite, Apt. #, etc.	3. Mailing Address 15844 Gleno Suite, Apt. #, etc.	eru Dr.	CHECK HERE IF MAKI	ING CHANGES
City & State FC	City&State / ampa	Fc.	4. FEI Number 59-3005480	A _I
33618 Country		untry 25A	- 5. Certificate of Status Desired	\$8.75 Add
6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registere	ed Agent
HARRISON, GREG 15813 HAMPTON VILLAGE DRIVE TAMPA FL 33618	,	Name Street Address (F	6 Glenary Dr	Zip Cod

8.	8. The above named entity submits this statemen	nt for the purpose of changing	its reaistered office	or registered agent	or both, in the State	of Florida.	am familiar with,	and accept
	the obligations of registered agent.		, .		,,			•

(NOTE: Registered Agent signature required when reinstating)

FILE	NOW-	FFF	IS.	\$61	25

9. Election Campaign Financing

\$5.00 May Be

Make Check Payable to

L	1 1CL NOW. 1 LL 10 301.25	Trust Fund Co	ontribution.	Added to F	ees Florida Dep	artment of State
10.	: OFFICERS AND DIRECTO	 RS	11.	ADDITIONS/	CHANGES TO OFFICERS AND	DIRECTORS IN 1Q ,
TITLE	PD	Delete	TITLE	DRES/ D.	DAITING SANTIAG	D ☐ Change
NÁME	LYNCH, MICHAEL	, .	NAME	I.CB	20 HAMPTON Uil	Ipro Da
STREET ADDRESS	3214 HOEDT RD.		STREET ADDRESS			
CITY*ST-ZIP	TAMPA FL 33618		CITY-ST-ZIP	~ /	1	610
TITLE	TD	Delete	TITLE	DAL LUC	asurer	☐ Change Addition
NAME	HARRISON, GREG	•	NAME T	Eric K	objectte	
STREET ADDRESS	15813 HAMPTON VILLAGE		STREET ADDRESS	<u> </u>	slenary Dr.	
CITY-ST-ZIP	TAMPA FL 33618	ಿನಾಯ ಎಂದಿನ ಕ		lamoci	FC 33618	~- <u>-</u>
TITLE	DV	Delete	TITLE	SECRETA	RY	☐ Change ★ Addition
NAME	CARO, JOSEPH	•	NAME C	DIETTE	JACCARD	,,
STREET ADDRESS	15804 FENTON DRIVE		STREET ADDRESS	5824 G	revond Jeioc	
CITY-ST-ZIP	TAMPA FL 33618		CITY-ST-ZIP	TAMPA F	1 33 5 18	
TITLE	DS	Delete			BINETTEA	☐ Change
NAME	CAIN, LINDA	•	NAME C	FFICER -	D 300	٦
STREET ADDRESS	15838 GLENGRN DRIVE				NARN Drive	}
CITY-ST-ZIP	TAMPA FL 33618				72 33 618	
TITLE	D	Delete		OPFICE R		☐ Change ★ Addition
NAME	ALLOWAY, GINGER	•	NAME 5	TEFANY	MILLS .	
STREET ADDRESS	15802 GLENGRN DRIVE		STREET ADDRESS	5805 H/	AMPTON VILLAG	re Durve
CITY-ST-ZIP	TAMPA FL 33618	•	CITY-ST-ZIP 7	AMPA F	EL 33618	,
TITLE	P	Delete	TITLE	FRICER	-5	Change Addition
NAME	STRAUSS, KARISON	▼ -	NAME C	HUCK F	DREHAN	•
STREET ADDRESS	15815 HAMPTON VILLAGE DR.		STREET ADDRESS 1	5828 HA	MPTON VILLAG	E DIELVE
CITY-ST-ZIP	TAMPA FL 33618		CITY-ST-ZIP	'AMPA I	FL 33618	

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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:

813-269-0575