

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N16581 (3)

1. Corporation Name
THE VILLAS OF HAMPSHIRE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 3700 CLUBHOUSE LN BOYNTON BEACH FL 33436
Mailing Address: 3700 CLUBHOUSE LN BOYNTON BEACH FL 33436

3. Date Incorporated or Qualified: 08/29/1986
3a. Date of Last Report: 06/20/1995
4. FEI Number: 59-2843903
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
**DUFRESNE, DONALD P ESQ
DUFRESNE & WITOWSKI, PA
12788 FOREST HILL BLVD
WELINGTON FL 33414**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and Zip Code.

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HOLLANDER, LEONARD	
STREET ADDRESS	3700 CLUBHOUSE LN	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	YARFITZ, LEO	
STREET ADDRESS	3700 CLUBHOUSE LN	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BECKER, SAM	
STREET ADDRESS	3700 CLUBHOUSE LN	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WECHSLER, NATE	
STREET ADDRESS	3700 CLUBHOUSE LANE	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GURIN, NATALIE	
STREET ADDRESS	3700 CLUBHOUSE LN	
CITY-ST-ZIP	BOYNTON BEACH FL 33436	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 3/14/96 Date: _____ 407-734-5000 Daytime Phone #

CR2E037 (12/95)