DOCUMENT # N24565

FILED
Sep 06, 2000 8:00 am
Secretary of State
09-06-2000 90096 048 ****61.25

1. Entity Name
The Hamptons at Tkple wood Home Owners Association Inc.

Principal Place of Business	Mailing Address
	725 N. A1A Suite C110 Jupiter, FL. 33477

2. Principal Place of Business	3. Mailing Address
725 N. A1A	725 N. A1A
Suite, Apt. #, etc.: Suite C110	Suite, Apt. #, etc.: Suite C110
City & State: Jupiter, FL	City & State: JUPITER, FL
Zip: 33477 Country: P.B	Zip: 33477 Country: P.B

DO NOT WRITE IN THIS SPACE

4. FEI Number 650023662 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Schwind, George St. John, KNOP DICKER 500 Australian Ave Suite 600 West Palm Beach 33401	Name: Steve Inglis c/o Bristol Management Street Address (P.O. Box Number is Not Acceptable): 725 No. A1A Suite C110 City: Jupiter FL Zip Code: 33477

8. 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 _____ Steve Inglis 8-28-2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PR PRESIDENT. TROY HOLLOWAY 202 HAMPTON CR. JUPITER, FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR PETER RENEE 264 SUSSEX CR. JUPITER, FL. 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SC. SEC. JOSEPH RANDAZZO 232 HAMPTON CT. JUPITER, FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DR Coleen Scalzo 148 E. Hampton WAY JUPITER, FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DR George Litinski 136 S. Hampton Dr. Jupiter, FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR Terry Targett 177 So. Hampton Dr Jupiter, FL 33458	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. I hereby certify that the information supplied with this filing 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: _____ Joseph Randazzo 8-28-00 515-3551
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #