2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# N28176

Entity Name: HAMPTON CLUB ASSOCIATION, INC.

Current Principal Place of Business:

6604 HAMPTON CIR
BOCA RATON, FL 33496 US

New Principal Place of Business:

Current Mailing Address:

6604 HAMPTON CIR
BOCA RATON, FL 33496 US

New Mailing Address:

FEI Number: 65-0190705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHLICHER, ILENE
6604 HAMPTON CIR
BOCA RATON, FL 33496 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:	D	( ) Delete
Name:	BRESLAW, DR. KRISTY	
Address:	17260 HAMPTON BLVD.	
City-St-Zip:	BOCA RATON, FL 33496	
Title:	V	( ) Delete
Name:	LEVI, NORMAN	
Address:	17192 HAMPTON BLVD.	
City-St-Zip:	BOCA RATON, FL 33496	
Title:	S	( ) Delete
Name:	SOSNIAK, RANDY	
Address:	17281 HAMPTON BLVD	
City-St-Zip:	BOCA RATON, FL 33496	
Title:	T	( ) Delete
Name:	SCHLICHER, ILENE	
Address:	6604 HAMPTON CIRCLE	
City-St-Zip:	BOCA RATON, FL 32496	
Title:	P	( ) Delete
Name:	DEOLIVEIRA, VIRGIL	
Address:	6614 HAMPTON CIR.	
City-St-Zip:	BOCA RATON, FL 33496	

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:	
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: ILENE W. SCHLICHER T 01/07/2009

Electronic Signature of Signing Officer or Director — Date