2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

SIGNATURE:

an address, with all other like empowered

FILED DOCUMENT # N48175 Apr 24, 2000 8:00 am Secretary of State 1. Entity Name HAMPTON LAKES LOT OWNERS ASSOCIATION, INC. 04-24-2000 90099 045 ****61.25 Mailing Address Principal Place of Business 19190 SAN CARLOS BLVD ROXANNE BUHRIG C/O HEINZ AUTO PILOTS INC #2 FT MYERS BCH FL 33931-2265 FT. MYERS FL 33931 US 2. Principal Place of Business 3. Mailing Address 9411 Cypress Lake Drive 9411 Cypress Lake Drive Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 2 Suite 2 City & State 4. FEI Number Applied For City & State 65-0949324 Not Applicable Fort Myers, Florida Fort Myers, Florida \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name W. Schoo Management, Inc. Street Address (P.O. Box Number is Not Acceptable) **BUHRIG, ROXANNE** 9411 Cypress Lake Drivé C/O HEINZ AUTO PILORS INC Suite 2 19190 SAN CARLOS BLVD City 33919 FT MYERS BCH FL 33931 Fort Myers 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. PD TITLE ☐ Change Addition Delete D TITLE **BUHRIG, ROXANNE** NAME Paul Atkinson NAME STREET ADDRESS 14421 PINE LILY DR STREET ADDRESS 14401 Pine Lily Drive CITY-ST-ZIP Fort Myers, Florida 33908 CITY-ST-ZIP FT MYERS FL 33908 ☐ Change Addition Delete TITLE D TITLE SAMPSEL, NAN NAME Ken Deliaquila STREET ADDRESS STREET ADDRESS 14471 PINE LILY DR 14400 Hampton Lakes Court CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL Fort Myers, Florida 33919 Change Addition SD ☐ Delete TITLE TITLE BARTLETT, K. T. NAME STREET ADDRESS STREET ADORESS 14451 PINE LILY DR CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33908 ☐ Change Addition TITLE TD Delete TITLE NAME GLORIOSO, ALLISOM Tom Dunham NAME STREET ADDRESS STREET ADDRESS 10100 FOREST RIVER LN 14390 Pine Lily Drive CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33908 Fort Myers, Florida 33908 ☐ Delete ☐ Change Addition TIT) F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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

Daytime Phone #