2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90217 041 ****61.25

DOCUMENT # N48175

1. Entity Name

HAMPTON LAKES LOT OWNERS ASSOCIATION, INC.

94073810

MOORE CR2E037 (11/03)

Principal Place of Business	Mailing Address
C/O HENKE PROPERTY MGMT 6213-4 PRESIDENTIAL COURT FORT MYERS FL 33919 US	C/O HENKE PROPERTY MGMT 6213-4 PRESIDENTIAL COURT FORT MYERS FL 33919 US

2. Principal Place of Business	3. Mailing Address
c/o Henke Property Mgt Inc	c/o Henke Property Mgt Inc
Suite, Apt. #, etc.: 6213 A Presidential Ct	Suite, Apt. #, etc.: 6213 A Presidential Ct
City & State: Ft Myers FL	City & State: Ft Myers FL
Zip: 33919 Country: USA	Zip: 33919 Country: USA

4. FEI Number 65-0949324 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HENKE, CAROL J
6213-4 PRESIDENTIAL COURT
FORT MYERS FL 33919

7. Name and Address of New Registered Agent

Name: Henke, Carol J
Street Address (P.O. Box Number is Not Acceptable): c/o Henke Property Mgt Inc
6213 A Presidential Ct
City: Ft Myers FL Zip Code: 33919

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
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
Due By May 1, 2004

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CHRISTO, GEORGE 14330 HAMPTON LAKES CT FT MYERS FL 33908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BARTLETT, K. T. 14451 PINE LILY DR FT MYERS FL 33908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP S/V/D Bartlett, KT	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ATKINSON, PAUL 14401 PINE LILY DRIVE FT MYERS FL 33908	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RUBY, SCOTT 14520 PINE LILY DRIVE FT MYERS FL 33908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP P/D Ruby, Scott	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: K T Bartlett 4/1/04 239-481-7150
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #