FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N9300002933 (0)

THE MARSHALL AND ELAINE HAMPTON FOUNDATION, INC.

Charged Plans of Business Mailing Address							<u>-</u>	\$			
Principal Place of Business 3125 THORNHILL ROAD 3125 THORNHILL ROAD											
WINTER HAVEN FL 33880				WINTER HAVEN FL 33890				1 än n	ate of Last F	Papad	
								3. Date Incorporated or Qualified 06/30/1993		08/16/19	
2. Principal Place of Business			⊢ e eq	2a. Mailing Address				4. FEI Number Applied For 59-3197512 Not Applied be			
21			26	Suite, Apt #, etc.			\$8.75 Additional				
Suite, Apt. #, etc.				27			A= 00				
City & State			1	City & State			6. Flection Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zro Country			28	Zip Coun				8. This corporation has liability for i	ntangible '	tax under s.	199.032,
Ζφ 24		25	29		30			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
27		and Address of Curre	nt Regis	tered Agent				10. Name and Address of New H	egisterec	Agent	
						31	Nante				
HAMPTON, LEIGH						12	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
3125 THORNHILL ROAD WINTER HAVEN FL 33880						\$3					
WINTER	MAYEN FL	33000			ļ.,	84	City			85 Zip	Code
							· ·	oration submits this statement for the purard of directors. I hereby accept the app	FI	<u> </u>	s sistered office
SIGNATURE	Signature, typed:	or printed haloas of rejectioned age OFFICERS A		CTORS	13.		nt signature rest in	et when renstiting: ADDITIONS CHANGES TO OFF	DATE ICERS AN	Change	DRS IN 1Z
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14. I do hereby certify that the information supplied with this filing is vokuntarily 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 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 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 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 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 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 certify that the information supplied with this filing is vokuntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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