

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002250

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** HAMPTON RIDGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

901 NW 8TH AVENUE  
SUITE A-6  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 NW 8TH AVENUE  
SUITE A-6  
GAINESVILLE, FL 32601 US

**New Mailing Address:**

**FEI Number:** 59-3375242

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILSON, SALLY A  
901 NW 8TH AVE  
STE A-6  
GAINESVILLE, FL 32601 US

**Name and Address of New Registered Agent:**

WILSON, SALLY ANN  
901 NW 8TH AVE  
STE A-6  
GAINESVILLE, FL 32601 US

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: SALLY ANN WILSON

04/26/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BAKER, DENISE  
Address: 11623 SW 6 LANE  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: SD  
Name: KIRBY, CURTIS  
Address: 11603 SW 6TH LANE  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: DVP  
Name: STEVENS, TODD  
Address: 424 SW 117TH STREET  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: DT  
Name: BURNS, PAMELA  
Address: 11626 SW 6TH LANE  
City-St-Zip: GAINESVILLE, FL 32607 US

I hereby 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 all other like empowered.

SIGNATURE: DENISE BAKER

DP

04/26/2012

Electronic Signature of Signing Officer or Director

Date