2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 02, 2007 8:00 am Secretary of State DOCUMENT # N96000002509 1. Entity Name 05-02-2007 90076 035 ****61.25 HAMPSTEAD PARK NEIGHBORHOOD ASSOCIATION, INC. Principal Place of Business Mailing Address 5341 SW 91ST TER 5341 SW 91ST TERRACE SUITE A SUITE A GAINESVILLE FL 32608 GAINESVILLE FL 32608 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State Applied For City & State 4. FEI Number 59-3385094 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent Namo EMMERICH, WILLIAM S 5341 SW 91ST TERRACE SUITE A GAINESVILLE FL 32608 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 SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2007 Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE TITLE ☐ Delete ■ Addition NAME ACKLEY, JUDITH NAME STREET ADDRESS 9447 SW 31ST LN STREET ADDRESS Rainesville, FI 32408 CITY-ST-ZIP CITY - ST- 7IP GAINESVILLE FL 32608 ☐ Delete TITLE TITLE ___€hange ■ Addition Barrio, William BARRIO, WILLIAM 3104 SW 942 Way STREET ADDRESS STREET ADDRESS 3104 SW 94TH WAY Gainesville FL 32608 CITY - ST- 7IP GAINESVILLE FL 32608 CITY-SI-7IP TITLE Delele TITLE Forther, Thomas 3010 SW 98th Drive Gainesville FZ 32608 Addition NAMÉ JEBSON, LESUIE NAMI STREET ADDRESS STREET ADDRESS 3207 SW 98TH DR CITY-ST-ZIP CITY-ST-ZIP GAINESVILLE FL 32608 TITLE TITLE ☐ Delete ☐ Change Addition NAME NAMI STREET ADDRESS STRUET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-SI-7IP TITLE Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

12. I heroby cortify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

FILED