## 2007 NOT-FOR-PROFIT CORPORATION

## FILED Apr 06, 2007 8:00 am Secretary of State

Filing Fee is \$61.25 Due by May 1, 2007  Filing Fee is \$61.25 Due by May 1, 2007  Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TILE RIVES, BUD SARASOTA, FL 34238  TIRE ADDRESS SIREEL ADR	ANNUAL REPORT						Secretary of State				
2 IND WEST SR 434 SURE ADD SURE SOOD LONGWOOD, FL 32779-5044 US  2 Principal Place of Business - No P.O. Box # 3. Mighing Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  County  Zip  County  S. Cerdicate of Status Desired  F. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name SENTRY MANAGEMENT INC 2180 WEST SR 434 - SUITE 5000 LONGWOOD, FL 32779  City  Sheet Address (P.O. Box Number is Not Accoptable)  Sheet Address (P.O. Box Number is Not Accoptable)  Sheet Address (P.O. Box Number is Not Accoptable)  SIGNATURE  FILING Foo Is S61.25  Signature True work have a principal and the Laphtables  SIGNATURE  FILING Foo Is S61.25  Due by May 1, 2007  Philips Foo Is S61.25  Die Box Number and Address of Current Registered Agent  Filing Foo Is S61.25  Die by May 1, 2007  Filing Foo Is S61.25  Die Box Number and Address of Current Registered Agent Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature  Filing Foo Is S61.25  Die Box Number and Address of Current Registered Agent Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature  Filing Foo Is S61.25  Die Box Number and Address of Current Registered Agent Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature  Filing Foo Is S61.25  Die Box Number and Address of Current Registered Agent Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Signature Inc.  Signature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Signature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Signature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Signature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Address (P.O. Box Number is Not Accoptable)  Stonature Inc.  Address	1. Entity Name THE HAMPTONS OF SARASOTA COMMUNITY						04-06-200	7 90046 0	25 ****	61.25	
Suite, Apil #, etc.    Suite, Apil #, etc.   Suite, Apil #, etc.   92182007   Chg.NP   CR2E037 (12706)	2180 WEST SR 434 SUITE 5000		2180 WEST SR 434 Suite 5000						1 211 <b>1 1</b> 14 <b>2</b> 1 <b>5</b> 11	<b>119.1 8.1 18.8 1</b>	
City & State  Country  Country  S. Certificate of Status Desired  S. Name and Address of Current Registered Agent  7. Name and Address of Name Registered Agent  7. Name and Address of Name Registered Agent  Name  SERENTRY MANAGEMENT INC 2180 WEST SR 434 - SUITE 5000  LONGWOOD, FL 32779  City  FL Zep Code  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 acce  10. OFFICERS AND DIRECTORS  10. OFFICERS AND DIRECTORS  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN II.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AN	2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Secretificate of Status Desired   St. Certificate of Status Desired   St. St. Additional Fee Required   St. Certificate of Status Desired   St. St. Additional Fee Required   St. Certificate of Status Desired   St. St. Additional Fee Required   St. Additional Fee Required   St. Additional Fee Required   St. St. Additional Fee Required   St. Additi	Suite, Apt. #, etc.		Suite, Apt. #, etc.			02162007	Chg-NP	CR2E037	(12/06)		
Signature Street And Directors Not Acceptable   Signature Street Agent   Signature Street Agent Street Address (P.O. Box Number is Not Acceptable)    Signature Street Address (P.O. Box Number is Not Acceptable)   Signature Street Agent, or both, in the State of Florida. I am familiar with, and acceptable of the obligations of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of the obligations of registered agent.   Signature Street Agent, or both, in the State of Florida. I am familiar with, and acceptable of the obligations of registered agent.   Signature Street Agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent, or both, in the State of Florida. I am familiar with, and acceptable of registered agent.   Signature State of State	City & State		City & State				78				
Name  Name  Name  Sentry ManageMent Inc 2180 West SR 834 - Sult'e 5000  LONGWOOD, FL 32779  City  FL  Zip Code  8. The above named entity submits inits statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accent the obligations of registered agent.  SIGNATURE  Filling Foe is \$61.25  Due by May 1, 2007  PD Speaks Inch Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 10.  THE MAKE  RIVES, BUD  STREET ADDRESS  CITY-SI-2P  SARASOTA, FL 34238  THE VPD  SARASOTA, FL 34238  THE VPD  SARASOTA, FL 34238  THE TD  Delect  THE Delect  STREET ADDRESS  S	Zip	Country	Zip	Country		5. Certificate of	Status Desired				
SENTRY MANAGEMENT INC 2180 WEST SR 434 - SUITE 5000 LONGWOOD, FL 32779  City FL Zip Code  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 lamillar with, and accent the obligations of registered agent.  SIGNATURE  Filing Fee is \$61.25  Due by May 1, 2007  Pilite PD  MAKE Check payable to OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  INILE PD  RIVES, BUD  SIREL ADDRESS  SITE FLAGORSS  S		6. Name and Address of Current F	tegistered Agent			7. Name and Ac	laress of New F	legistered Ag	ent		
2180 WEST SR 434 - SUITE 5000 LONGWOOD, FL 32779  City FL Zip Code  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 access the obligations of registered agent.  SIGNATURE  Filing Fee is \$61.25  Due by May 1, 2007  Filing Fee is \$61.25  Due by May 1, 2007  Price From the foliation campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TILE RIVES. BUD  STREET ADDRESS 5101 FLAGSTONE DR  STREET ADDRESS 5101 FLAGSTONE DR	·										
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 accent the obligations of registered agent.  SIGNATURE  Signature Invariant and purposed agent and bit is applicable.  Filling Fee is \$61.25  Due by May 1, 2007  9. Election Campaign Financing Added to Fees Trust Fund Contribution.  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  RIVES, BUD SIRELA DORRESS OFFICERS AND DIRECTORS IN 10  CITY-ST-2P SARASOTA, FL 34238  CITY-ST-	2180 WEST SR 434 - SUITE 5000			Street A	Street Address (P.O. Box Number is Not Acceptable)						
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access the obligations of registered agent.  SIGNATURE	LONGWOOD, FL 32779										
SIGNATURE    Signature   Signa			City				FL	Zip Code	3		
Filing Fee is \$61.25 Due by May 1, 2007  10. OFFICERS AND DIRECTORS  TILLE PD TRUST Fund Contribution.  OFFICERS AND DIRECTORS  TILLE PD TRUST Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TILLE PD TRUST AND THANGES TO SET CONTRIBUTION  STREET ADDRESS  STREET ADDRESS  GITY-ST-ZPP  SARASOTA, FL 34238  SIREST ADDRESS  SOTT S-ST-ZPP  SARASOTA, FL 34238  SIREST AD	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.										
Trust Fund Contribution.    Added to Fees   Florida Department of State											
TITLE NAME RIVES, BUD STREET ADDRESS 5101 FLAGSTONE DR SARASOTA, FL 34238 CITY-SI-ZP STREET ADDRESS 5101 FLAGSTONE DR STREET ADDRESS											
NAME STREET ADDRESS CITY-ST-ZIP TITLE VPD SARASOTA, FL 34238  CITY-ST-ZIP SIREET ADDRESS CITY-ST-ZIP TITLE SP President BENNETT, JOHN SIREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  CITY-ST-ZIP TITLE TD Delete TITLE TD TD Delete TITLE TD TD Delete TITLE TD TD Delete TITLE TD	10.	OFFICERS AND DIR	ECTORS	11.	,	ADDITIONS/CHAN	GES TO OFFICE	R\$ AND DIRE	ECTORS IN	10	
MAME STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE NAME SIREET ADDRESS CITY-ST-ZIP SOP President BENNETT, JOHN STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE SOP President BENNETT, JOHN STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE TD NAME MERIC, J 4909 BRIDGEHAMPTON BLVD CITY-ST-ZIP SARASOTA, FL 34238  TITLE D STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE D STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE D STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE NAME GITOMER, GARY STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE NAME STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE NAME STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STR	NAME STREET ADDRESS	RIVES, BUD 5101 FLAGSTONE DR	Delete	NAME STREET ADDRESS				l	Change	£Addition	
NAME SIREET ADDRESS 5015 FLAGSTONE DR SIREET ADDRESS 5015 FLAGSTONE DR SIREET ADDRESS SARASOTA, FL 34238  TITLE TD MERIC, J STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE D SIREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE D SIREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE D SIREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34238  TITLE NAME BARBECK, GARY  Delete TITLE NAME  Change Addit NAME  Change Addit	NAME STREET ADDRESS	GERBER, BARRY 4952 BRIDGEHAMPTON BLVD	Delete	NAME STREET ADDRESS					Change	\ddition	
TITLE	NAME STREET ADDRESS	BENNETT, JOHN 5015 FLAGSTONE DR	☐ Delete	NAME STREET ADDRESS	Nan BIBI Sal	ey Niede 4 Highbur 12 Sota, F	recker y direk L 34a:	<u>.</u> 3 %	☐ Change	Addition	
TITLE	NAME STREET ADDRESS	MERIC, J 4909 BRIDGEHAMPTON BLVD	☐ Delete	NAME STREET ADDRESS	Eugi 50 5a	enia Zak 57 Flags rasota, F	i Hone Dr 2342	:≀c <del>3</del> 8	Change	Addition	
NAME BARBECK, GARY NAME	NAME STREET ADDRESS	GITOMER, GARY 6256 DONNINGTON CT	☐ Defete	NAME STREET ADDRESS					Change	Addition	
CITY-ST-ZIP SARASOTA, FL 34238  12.   hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information in filested at this court is true and exemption and that my cincerture shall have the same legal effect as if made under onth; that I am an officer or director.	NAME STREET ADDRESS CITY-ST-ZIP	BARBECK, GARY 5129 HIGHBURY CIR SARASOTA, FL 34238  Dertify that the information supplied with	this filing does not qualify for t	NAME STREET ADDRESS CITY-ST-ZIP the exemptions of	ontained	in Chapter 119. F	lorida Statutes.	further certify	/ that the ir	Addition Addition	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPE OR PRINTER LANE OF SIGNING OFFICER OR DIRECTOR

1.24 of

· 941 - 921· 462