

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000116962

FILED
May 01, 2008
Secretary of State

Entity Name: SOUTHAMPTON DEVELOPMENT CORP.

Current Principal Place of Business:

5851 N.W. 165TH STREET
TRENTON, FL 32693

New Principal Place of Business:

Current Mailing Address:

POB OX 186
TRENTON, FL 32693

New Mailing Address:

PO BOX 186
TRENTON, FL 32693

FEI Number: 26-1324536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLAUSSEN, DAVID
5851 N.W. 165TH STREET
TRENTON, FL 32693 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: CLAUSSEN, DAVID
Address: 5851 N.W. 165TH STREET
City-St-Zip: TRENTON, FL 32693

Title: DIR () Change (X) Addition
Name: DEAS, WILLIAM B
Address: 6480 SW 122ND ST
City-St-Zip: GAINESVILLE, FL 32608

Title: DIR () Change (X) Addition
Name: DEAS, MARILYN M
Address: 6480 SW 122ND ST
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID CLAUSSEN

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date