FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000093967 (5)

HAMPTON RIDGE DEVELOPMENT CORP.

FILED May 01 1998 8:00am Secretary of State

Principal Place of Business Mailing Address						- 1 TOOTICEST (SO TOTAL CIDIT COTES BEEN COTTA		ILEID IDING DI	IIII I ru t irus
18321 U.S. HIGHWAY 19 NORTH 19321 U.S. HIGHWAY 19 NO				RTH					
STE 500 STE 500						DO NOT WRITE IN THIS SPACE			
CLEARWATER	R FL 34624	CLEARWATER FL	CLEARWATER FL 34624			Do Not write in this space Date Incorporated or Qualified			
						01/01/1995			
2. Principal P	lace of Business	2a. Mailing Addres	SS			4. FEI Number		A	pplied For
21		26	26			59-3291739			ot Applicable
Suite, Apt. #, etc.		h	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22		City & State							tequired
City & State		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	7 _{(p}	Co	untry	,	8. This corporation owes or has paid			
24	25	29	30			Personal Property Tax due June 3			□ No
	g. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Regi	stered A	gent	
G/A	YNOR, JOSEPH W ESQ			81	Name				
2637 MCCORMICK PLACE			4	62 Street Address (P.O. Box Number is Not Acceptable)					
	EB				ļ				
CL	EARWATER FL 33759			83	ĺ				
				84	City		FI	85 Zip	Code
				ــــــــــــــــــــــــــــــــــــــ	L	rporation submits this statement for the pu			ian anninanan
agent. I a SIGNATURE	m familiar with, and accept the ob-					ation's board of directors. I hereby accept	DATE		
12.		AND DIRECTORS	13	4		ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 12
TITLE	SD	☐ DEL	TE 1.1	TITLE				Change	Addition
NAME	GAYNOR, JOSEPH W		1.2	NAME					
STREET ADORESS	2637 MCCORMICK DRIVE.	, # B			ADDRESS				
CITY-ST-ZIP	CLEARWATER FL 34619	☐ DEL		CITY - S	IT-ZIP			Change	☐ Additio
TITLE	D DARBOTORI IOURI T	L_J DEC		TITLE			'	Change	L.J Additio
NAME	HAMPTON, JOHN T 19810 GULF BLVD UNIT 4			NAME					
STREET ADDRESS	INDIAN SHORES FL 33785	•			TADDRESS ST-ZIP				
CITY-ST-ZIP TITLE	PO	DEL		TITLE	31-21	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Change	☐ Additio
NAME	HARDWICK, FREDERICK H	<u> </u>	32	NAME					
STREET ADDRESS	18321 U.S. HWY. 19 NOR		33	STREET	ADDRESS				
CITY - ST - ZIP	CLEARWATER FL 34624		3.4.	CITY-	ST-ZIP				
TITLE		☐ DEL	ETE 4.1	TITLE				Change	Addition
NAME			4.2	NAME					
STREET ADDRESS			4.3	STREET	T ADDRESS				
CITY-ST-ZIP		221		CITY-S	iT-ZIP			Chart	i a apt
TITLE		☐ DEL		TITLE				☐ Change	Additio
NAME				NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP TITLE		DEL		CITY-S	il- ZIP			Change	Additio
NAME		D.C.		NAME					
l					T ADDRESS				
STREET ADDRESS				CITY-S					
CITY-ST-ZIP	L	d with this filing does not a				in Section 119.07(3)(i), Florida Statutes. I fe	urther cer	tify that th	e information

indicated on this annual report or supplied with this limit does not qualify in the exemption stated in Section 1.15.07 (5)(f), Florida Statutes. I harder certify that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.