

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Suzanne B. Markham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000062120 (7)

1. Corporation Name

HAMPTON & ASSOCIATES CATASTROPHE SERVICES, INC.



Principal Place of Business

Mailing Address

1886 LODGEPOLE DRIVE
MILTON FL 32583

1886 LODGEPOLE DRIVE
MILTON FL 32583

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

25 Zip Country

26 Zip Country

27 Zip Country

28 Zip Country

29 Zip Country

30 Zip Country

9. Name and Address of Current Registered Agent

HAMPTON, JOEY H
1886 LODGEPOLE DRIVE
MILTON FL 32583

3. Date Incorporated or Qualified

08/08/1995

3a. Date of Last Report

4. FID Number

59 3337399

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032

Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

JOEY HAMPTON

82 Street Address (P.O. Box Number is Not Acceptable)

1507 QUINN HILL RD

83 City

84 State

FL

85 Zip Code

32571

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation presents this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was and is made by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0508, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY - ST - ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY - ST - ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY - ST - ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY - ST - ZIP

33. TITLE

34. NAME

35. STREET ADDRESS

36. CITY - ST - ZIP

SIGNATURE:

Joe Hampton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4676

SG 3-28-96

CR2E034 (12/95)