

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # P96000080553

1. Entity Name
HAMPTON SQUARE CONSTRUCTION COMPANY



Principal Place of Business
2444 N ESSEX AVE
HERNANDO, FL 34442

Mailing Address
2476 N. ESSEX AVE
HERNANDO, FL 34442



04102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3408925	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABEL, ERIC D
2476 N ESSEX AVENUE
HERNANDO, FL 34442

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

U000000902881
04/30/08-80023-021 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TAMPOSI, STEPHEN A 2476 N ESSEX AVENUE HERNANDO, FL 34442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NASH, Q. PETER 40 TEMPEL ST. NASHUA, NH
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PASTOR, JOHN E 2476 N ESSEX AVENUE HERNANDO, FL 34442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S ABEL, ERIC D 2476 N. ESSEX AVE HERNANDO, FL 34442
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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 607, 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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/08

Date

352-746-6060

Daytime Phone #

STEPHEN A. TAMPOSI