

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S26416**

1. Corporation Name
THE HOLLIS HAMPTON COLLECTION, INC.

Principal Place of Business
**2 Tera Lane
Winter Haven, FL 33880**

Mailing Address
SAME

3. Date Incorporated or Qualified
01-22-91

3a. Date of Last Report
04-18-95

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30
9. Name and Address of Current Registered Agent

**Christy M. Hemenway
2 Tera Lane
Winter Haven, FL 33880**

4. FEI Number

59-3045219

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$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
Richard A. Hemenway

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

83

84 City **Winter Haven**

FL

85 Zip Code
33880

11. Pursuant to the provisions of Sections 607.0502 and 119.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized 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 607.0506, Florida Statutes.

SIGNATURE

[Signature]

4-25-96

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE
**P/D
Hemenway, Christy M.
2 Tera Lane
Winter Haven, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE
**S/T/D
Hemenway, Richard A.
2 Tera Lane
Winter Haven, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
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CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

☒ Change ☐ Addition
**P/D
Hemenway, Richard A.
2 Tera Lane
Winter Haven, FL 33880**

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

☒ Change ☐ Addition
**S/T/D
Hemenway, Christy M.
2 Tera Lane
Winter Haven, FL 33880**

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

☐ Change ☐ Addition

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

☐ Change ☐ Addition

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

☐ Change ☐ Addition
**700001826177
-05/17/96--01018--037
***200.00**

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 a 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 or Block 14, or on an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A. Hemenway 4/25/96 941-294-5723
DATE DAY/PHONE #

CR2E034 (12/95)