

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07790

Entity Name: HAMPSHIRE HOMES HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**381 N. KROME AVE
SUITE 205
HOMESTEAD, FL 33030**Current Mailing Address:**381 N. KROME AVE
SUITE 205
HOMESTEAD, FL 33030 US**FEI Number:** 59-2643108**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**IGLESIAS LAW GROUP
15800 PINES BLVD, SUITE 303
PEMBROKE PINES, FL 33027 US*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:** DAVID IGLESIAS, ESQ.**03/20/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, DIRECTOR
Name EGHBAL, JESSICA
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name HOLMES, KATHLEEN
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title PRESIDENT, DIRECTOR
Name WOJNAR, THOMAS A
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title SECRETARY, DIRECTOR
Name DAVILA, ALEX
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title VP, DIRECTOR
Name MUSKAT, PHILLIP
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name KOLB, MARGARET "SUSIE"
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name HOYLE, PAUL
Address 381 N. KROME AVE
 SUITE 205
City-State-Zip: HOMESTEAD FL 33030

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS WOJNAR**PRESIDENT****03/20/2023**

Electronic Signature of Signing Officer/Director Detail

Date