2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2004
Secretary of State

DOCUMENT# H63738

Entity Name: HAMPSHIRE HOUSE, INC.

Current Principal Place of Business:

403 ST. AUGUSTINE BLVD.
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

C/O LAWRENCE R. PATTERSON
3010 THIRD STREET SOUTH
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 59-2651038 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATTERSON, LAWRENCE R ESQ
3010 SOUTH 3RD ST
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: TAYLOR, PATRICIA O.,
Address: 3010 S. THIRD STREET
City-St-Zip: JACKSONVILLE BCH FL,

Title: VPD ( ) Delete
Name: TAYLOR, MELBOURNE R
Address: 403 ST. AUGUSTINE BLVD.
City-St-Zip: JAX. BEACH, FL 32250

Title: ST ( ) Delete
Name: TAYLOR, REGINALD
Address: 403 ST. AUGUSTINE BLVD.
City-St-Zip: JAX. BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: TAYLOR, PATRICIA O
Address: 403 ST. AUGUSTINE BLVD.
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA O. TAYLOR DPS 01/30/2004
Electronic Signature of Signing Officer or Director Date