2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722937

Entity Name: HIDDEN HARBOUR ESTATES, INC.

FILED Apr 19, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

4300 SE ST LUCIE BLVD STUART, FL 34997

Current Mailing Address: New Mailing Address:

4300 SE ST LUCIE BLVD STUART, FL 34997

FEI Number: 59-1398633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NOONAN, RICHARD W BRECHBILL, MARK CPA 4300 SE ST LUCIE BLVD 215 S. FEDÉRAL HWY. #28 BEACON SUITE 100 STUART, FL 34997 US STUART, FL 34994 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: MARK BRECHBILL 04/19/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MCPHERSON, BOB R MCPHERSON, BOB R Name: Name: Address: 4300 SE ST LUCIE BLVD #68 Address: 4300 SE ST LUCIE BLVD #68

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: Title: (X) Change () Addition () Delete

Name: HALL, BETTY T Name: HALL, BETTY T

Address: 4300 SE ST LUCIE BLVD. #160 Address: 4300 SE ST LUCIE BLVD, #160

City-St-Zip: STUART, FL City-St-Zip: STUART, FL

Title: (X) Delete Title: () Change () Addition LUPPINO, RICHARD

Name: Name: 4300 SE ST LUCIE BLVD #214 Address: Address:

City-St-Zip: STUART, FL 34997 City-St-Zip:

(X) Change () Addition Title: () Delete Title: TD Name: CUMINGS, TOM Name: CUMINGS, TOM

4300 SE ST LUCIE BLVD #202 Address: Address: 4300 SE ST LUCIE BLVD #202

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: () Delete Title: VD (X) Change () Addition

NOONAN, RICHARD NOONAN, RICHARD Name: Name:

4300 SE ST LUCIE BLVD #28 4300 SE ST LUCIE BLVD #28 Address: Address:

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: (X) Delete Title: () Change () Addition SWOPE, JULES Name: Name:

Address: 4300 SE ST LUCIE BLVD Address: STUART, FL 34997 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BOB R. MCPHERSON Ρ 04/19/2006