

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722937

FILED
Jan 30, 2007
Secretary of State

Entity Name: HIDDEN HARBOUR ESTATES, INC.

Current Principal Place of Business:

4300 SE ST LUCIE BLVD
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

4300 SE ST LUCIE BLVD
STUART, FL 34997

New Mailing Address:

FEI Number: 59-1398633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRECHBILL, MARK CPA
215 S. FEDERAL HWY.
SUITE 100
STUART, FL 34994 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCPHERSON, BOB R
Address: 4300 SE ST LUCIE BLVD #68
City-St-Zip: STUART, FL 34997

Title: SD () Delete
Name: HALL, BETTY T
Address: 4300 SE ST LUCIE BLVD, #160
City-St-Zip: STUART, FL

Title: TD () Delete
Name: CUMINGS, TOM
Address: 4300 SE ST LUCIE BLVD #202
City-St-Zip: STUART, FL 34997

Title: VD () Delete
Name: NOONAN, RICHARD
Address: 4300 SE ST LUCIE BLVD #28
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: RICHARD W. NOONAN

VP

01/30/2007

Electronic Signature of Signing Officer or Director

Date